

CVAM application for membership (Full)

Application for Full Membership for the year commencing 1st Sept 20

Name.....

Address.....

.....Postcode.....

Home phone number.....Mobile number.....

Email address.....

Date of Advanced Test Pass.....

I enclose a cheque*/cash for £15 (*made payable to CVAM.)

I would like to pay my membership fee by Standing Order and have completed the form and forwarded it to my bank.

(Please delete as appropriate)

I confirm that I am a member of the IAM Roadsmart.

(Please note that National Membership of the IAM is a condition of membership of CVAM)

IAM Membership Number

My name, town of residence and email address may be made available to all other CVAM Members and Associates. Yes. No.

Signed.....Date.....

Please complete the form and return it together with payment to the Group Treasurer

Peter Beange
West Barn,
Cameley,
Temple Cloud,
BS39 5AH

CVAM use only.

Membership Card number.....issued date.....cheque/cash.....