



WINDHOEK MOTOR CLUB



Affiliated to the Namibian Motor Sport Federation

P.O.Box 21041 Windhoek Namibia Tel No. 081 124 9200

2023

FAMILY N\$1500

APPLICATION FOR FAMILY MEMBERSHIP
I, THE UNDERSIGNED, HEREBY APPLY FOR MEMBERSHIP OF THE WINDHOEK MOTOR CLUB, AND IF ACCEPTED HEREBY
AGREE TO ABIDE BY THE RULES AND REGULATIONS OF THE CLUB AS STIPULATED IN THE CLUB'S CONSTITUTION.
MEMBERSHIP VALID FROM YEARLY AGM TO NEXT YEARLY AGM

BANKING DETAILS

Windhoek Motor Club

Bank Windhoek

Branch - Kudu (482172)

Account - 1135509401

MAIL POP TO: ccbwhk@ccb.com.na

<u>MAIN MEMBER</u>			
SURNAME:		INITIALS:	
FIRST NAME:		NICK NAME:	
ID NUMBER:		DATE OF BIRTH:	
MEDICAL AID SCH :ME & NUMBER:			
ADDITIONAL:			
SURNAME:		INITIALS:	
FIRST NAME:		NICK NAME:	
ID NUMBER:		DATE OF BIRTH:	
MEDICAL AID SCHEME & NUMBER:			
SURNAME:		INITIALS:	
FIRST NAME:		NICK NAME:	
ID NUMBER:		DATE OF BIRTH:	
MEDICAL AID SCHEME & NUMBER:			
SURNAME:		INITIALS:	
FIRST NAME:		NICK NAME:	
ID NUMBER:		DATE OF BIRTH:	
MEDICAL AID SCHEME & NUMBER:			
SURNAME:		INITIALS:	
FIRST NAME:		NICK NAME:	
ID NUMBER:		DATE OF BIRTH:	
MEDICAL AID SCHEME & NUMBER:			



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MAIL POP TO: ccbwhk@ccb.com.na

MAIN MEMBER E-MAIL ADDRESS:

POSTAL ADDRESS:

RESIDENTIAL ADDRESS:

BUSINESS ADDRESS:

OCCUPATION: ELECTRICIAN / PLUMBER

Your email address will be used as a form of communication to all club members

TEL NO: (B) (H) (CELL)

NO dual membership of a club is allowed for the same CODE. You need to choose ONE Club

SPECIFY PREVIOUS MOTOR CLUB MEMBERSHIP:

LETTER OF GOOD STANDING YES NO please attach to application

SIGNATURE:

DATE:

PROPOSED BY:

SIGN: _____

MEMBERSHIP CARD & CONSTITUTION ISSUED DATE: _____ MEMBER INITIAL:

OFFICE USE ONLY

THIS APPLICATION WAS ACCEPTED AT A MEETING OF THE EXECUTIVE COMMITTEE HELD ON:

CHAIRMAN

TREASURER

MEMBER NO:

PROCESS DATE:

INITIAL:

RECEIPT NO:

RECEIPT DATE:

INITIAL: