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Olub Membership Application: 240	
Name:	Date of Birth: (If under 18 on 01/01/2014)
Email:	.Tel:
Postal Address:	
	. Postcode:
I apply for membership of the Monoposto Racing Club for 2015	
I consent to my name, postal address, email and home phone number be in the Monoposto Club Membership List which may be sent to members.	eing included YES / NO
In the event of the Monoposto Racing Club Limited being wound up, I undertake to contribute a sum not exceeding one pound.	
Monoposto and Tiedeman Trophy Mono Champi additional £95	ionships Registration:
MSA Racing Licence Number:	Preferred Race Number:
Car Make & Type:	Year:
Engine Make & Tuner:	Capacity:
Class: Mono 2000 /Classic/Dtec/1800/1600/Moto (Mark as appropriate, see www.monoposto.co.uk for class details)	Transponder #:(or write To Be Hired)
I apply to register as a competitor in the 2015 Monoposto Champion and the 2015 Tiedeman Trophy Mono Championship	
2015 is my first season of car circuit racing	YES / NO
I am eligible for the 2015 Monoposto SUNBAC Nova Awards (To be eligible you must start your first race in the 2015 Monoposto Championship as a "Novice" ie not having qualified for a National A Licence)	YES/NO
I agree to rounds of the 2015 Monoposto Championship and/or the 2015 Tiedeman Trophy Mono Championship being substituted in the eve	ent of a cancellation.
Signed:	Oate:

Please complete, sign & return this form, with payment (Membership + Registration = £135.00) to:

Rachel Lovett,

Midland Automobile Club, Shelsley Walsh Hill Climb, Shelsley Walsh, Worcestershire, WR6 6RP

Tel: 01886 812 211

email: rachel@monoposto.co.uk

Note: email is not a secure means to send payment or other confidential details. Please use post, fax or phone.

PAYMENT	DETA	ILS			
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Cheque/PO payable to Monoposto Racing Club

Ex	Expiry Date: /						3 digit cvc number:											
	CARD NUMBER																	