



## Club Membership Application Form

**Full Name: (Driver's Name)** \_\_\_\_\_

**Full Address:** \_\_\_\_\_

**Postcode:** \_\_\_\_\_ **Contact Phone No:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Age:** (If under 18) \_\_\_\_\_ **Transponder No:** (TX) \_\_\_\_\_

**Driver MSUK Licence No:** \_\_\_\_\_ **Parent (If applicable) MSUK Licence No:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

We will only use your email address to keep you informed of any relevant owner driver activities, i.e. weekend open practice days, race entry confirmations, etc. If you prefer not to be contacted, please do not supply an address.

**CURRENT CLASS:** \_\_\_\_\_ **Preferred Race Number:** \_\_\_\_\_

*I hereby apply for membership to Lydd International Kart Club for a one-year period from 1<sup>st</sup> January. I agree to abide by the club's rules.*

**Signed: (Driver)** \_\_\_\_\_ **Date:** \_\_\_\_\_

If the applicant is under the age of 18 years of age their parent/legal guardian must complete the below section. The Lydd International Kart Club operates in accordance with the MSUK Child Protection Policy and Guidelines. I am the parent/legal guardian of the applicant and agree to their membership of the Lydd International Kart Club.

**Signature: (Parent)** \_\_\_\_\_ **Name: (Parent)** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Postcode:** \_\_\_\_\_ **Telephone No:** \_\_\_\_\_

*Please bring the completed form together with membership fee of £50 to: Lydd Kart Circuit, Dengemarsh Road, Lydd, Kent. TN29 9JH*

Please be advised that these details will be stored on a computer in accordance with the requirements of the Data Protection Act. They will not be provided to other people or organisations without your permission. If you do not agree with this please contact the Membership Secretary.

**OFFICE USE:** **PAID £50 Cash / Card - Date paid:** \_\_\_\_\_ **On PC:** \_\_\_\_\_

**Allocated LIKC Membership Number:** \_\_\_\_\_ **Expiry Date:** \_\_\_\_\_ **New / Renewal**