

 ***PROBABLY THE LARGEST***

***DRAG RACING CLUB IN EUROPE***

# Enjoy a year’s membership for as little as £30

AS AN S.P.R.C. MEMBER YOU WILL BECOME A MEMBER OF A LIMITED LIABILITY COMPANY.

DRAG RACING LIMITED TRADING AS SANTA POD RACERS CLUB.

YOUR LIABILITY IS LIMITED TO £1 (ONE POUND) IN THE EVENT OF WINDING UP.

YOU WILL RECEIVE:

**\* Club decals \***

**\* Membership Card \***

**\* Drag Racing Rule Book \***

**\* Event credentials pass holder \***

 Simply complete the tear off slip below and return it together with the correct fee to:-

**S.P.R.C. P O BOX 12, RUSHDEN, NORTHANTS, NN10 OZU**

Affiliated to the Motor Sports Association and the Auto Cycle Union

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I would like to apply/renew for membership to the S.P.R.C. If renewing, please state 2016 membership number.............................

Mr/Mrs/Ms........................................................................................................................................................................................

Address............................................................................................................................................................................................

…................................................Post Code......................................... Email …………………………………………………………

Telephone Day ........................................Mobile ………................................... Evenings.................................................................

**SIGNED....................................................................DATE OF APPLICATION................................................................**

I enclose cheque/postal order in the sum of £30 made payable to S.P.R.C.

I wish to pay by Mastercard/Eurocard/Visa/Delta/Switch/Barclay Connect

**A SURCHARGE OF 4% WILL BE MADE FOR CREDIT/DEBIT CARD PAYMENTS**

I authorise you to debit my card number with the amount of £30 PLUS £1.20 surcharge

Payment of £… has been sent by BACS to the SPRC Account No 90798290 Sort Code 20-45-77

Card Number Expiry Date

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Signature of Card Holder ……………………………………………………. **LAST 3 DIGITS ON REVERSE OF CARD \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**If paying by Switch card, please advise Issue No: \_\_\_\_\_\_\_\_ and/or Valid from and Valid to dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Name of Card Holder................................................................................................................. Address.................................................................................................................................................................................................................................................................Post Code.....................................................................................

## FOR OFFICIAL USE

Fee Received................................ 2017 Number Issued.............................. Renewal Date ….....................