

# BMCNO Membership Application

*Print this form to submit your application.*

Name: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_ Occupation: \_\_\_\_\_

Where did you learn of BMCNO? \_\_\_\_\_

What other car clubs do you belong? \_\_\_\_\_

Include information in the Online Web Directory    yes\_\_\_ no\_\_\_

Please list me as ICE, (In Case of Emergency) willing to render assistance to members who break down in my area.    yes\_\_\_ no\_\_\_

## BRITISH CAR INFORMATION

### *1<sup>st</sup> CAR*

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Body Style: \_\_\_\_\_

Color: \_\_\_\_\_

### *2<sup>nd</sup> CAR*

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Body Style: \_\_\_\_\_

Color: \_\_\_\_\_

### *3<sup>rd</sup> CAR*

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Body Style: \_\_\_\_\_

Color: \_\_\_\_\_

**Membership - \$24 per year due July 1<sup>st</sup>**

### **Payable as follows:**

**Check** payable to "British Motoring Club New Orleans (BMCNO)" and return to:  
British Motoring Club New Orleans , P.O. Box 73213 , Metairie, LA 70033

**PayPal** - [www.clubregistration.net](http://www.clubregistration.net) (click on British Motoring Club at this web site)

**Cash or Check** at any monthly meeting.

*All payments need to be accompanied by this completed application form.* It is imperative that we have your correct and active email address because this is how all communication is now processed.

**"I agree to abide by the rules and regulations as set forth by the Club Officers under The British Motoring Club New Orleans, Inc. Charter and By-Laws."**

Name \_\_\_\_\_ Date \_\_\_\_\_