

2018 CLUB MEMBERSHIP APPI	LICATION (to	o be completed in F	ULL)	Unique Clu	ub No:	
Applicants Full Name:						
Date of Birth:						
Name of Parent / Guardian if aged	d 18 years or	r under:				
Address						
			Post Code	:		
Tel No:		_	Mobile:			
Email Address:						
ACU Licence/Registration No:						
Applicants Signature:						
Parent/Guardian Signature:						
Club Membership By becoming a member of the Islandon accordance with the ACU Handboth specific club rules:  No riding before or after Abusive or challenging By becoming a member accordance with the Islandon accordance with the ACU Handboth accordance with the ACU Handbot	ook. We wou ter events g behaviour to	uld also like to draw y owards observers wi	our attention to	the following	ing rules and	
Annual Membership Fee is £10						T. I. Ostion
If paying by cheque please make	it payable to	Isle of Man Youth T	rials Club Ltd	I	Cash:	Tick Option
If paying by bank transfer:	Sort Code: A/c No: A/c Name: Ref:	55-91-04 41889282 IoM Youth Trials riders name	very import	tant to ensu	Cheque: Bank Tfr: ure this is que	oted
Photographs From time to time the club may wi childs photograph to be published			r child, if you <b>D</b> o	O NOT wish	h your	
Your 2018 Unique Club Number	r:					

You will have to supply this number to the ACU to either get or renew your trials registration card.

Please return form and money to the secretary of the club: Sharon Christian, 16 Woodlands View, Farmhill Douglas, Isle of Man, IM2 2BT. Email: sharon\_I\_christianc@manx.netCubbon
Club Secretary: Sharon Christian, 16 Woodlands View, Farmhill, Douglas, Isle of Man, IM2 2BT, Tel: 463496, Email: sharon\_I\_christian@manx.net