

APPLICATION TO JOIN THE SERIES 2 CLUB

"If your hinges stand proud, you're one of our crowd"



PLEASE USE BLOCK CAPITALS

	1 st Member's Surname	
2 nd Member's Forename	2 nd Member's Surname	
House No./Name	Street	
Village/ District	Town/City	
County	Country	
Postcode please do not omit (decides your club area)	Telephone Number	
Email Address*	Mobile Number	
* By giving my email address I agree to receive emails and offers and Land Rover related advertisements. (Your person	ewsletters sent out by the club which may contain special cl al details will only be used for club business.)	ub
I have read this form and agree to abide by the Rules and Articles of Association of the Cl them on the club website:- www.series2club.co.uk or you can scan the QR Code above.	b as published and amended from time to time. Copies are available on request or you can	n view
Membership Great Britain Membership Overseas Total Payable (non refundable)	£ 25.00 £ £ 30.00 £ £	
Annual subscriptions are payable in advance for a full year from the date of fi	st joining and annually thereafter on each anniversary of joining.	
Signed	Date	
Signed (2nd Member)	Date	
HOW TO PAY - By cheque, postal order or Card (in GBP only) m		
HOW TO PAY - By cheque, postal order or Card (in GBP only) m Payment by Cheque Cheque Number		
Payment by Cheque		
Payment by Cheque		
Payment by Cheque Cheque Number or Pay by Credit or Debit Card - Please complete the details below Card Expiry Date	Payment by Postal Order Ref	
Payment by Cheque Cheque Number or Pay by Credit or Debit Card - Please complete the details below	Payment by Postal Order Ref Ref date:	
Payment by Cheque Cheque Number or Pay by Credit or Debit Card - Please complete the details below Card Expiry Date	Payment by Postal Order Ref Ref date:	
Payment by Cheque Cheque Number or Pay by Credit or Debit Card - Please complete the details below Card Expiry Date M Y Y CVC no	Payment by Postal Order Ref Ref date:	
Payment by Cheque Cheque Number or Pay by Credit or Debit Card - Please complete the details below Card Expiry Date M Y Y CVC no Card Number Card Type (please tick)	Payment by Postal Order Ref Ref date:	

(March 2023)

Send your remittance with this form to: