

**Associate Application to join the Mid Wales Advanced Motorists  
(MWAM) Group  
Registered Charity No. 1109484**

Title					Surname															
Forename(s)																				
Usual Name																				
Address																				
HomeTel:																				
Mobile Tel:																				
eMail:																				

Type:            Car             Motorcycle

Preferred  
Contact by       Letter             eMail             Telephone

Please place a  in the appropriate boxes

I can offer the following skills or resources to the group

Other Comments

Please enrol me as an Associate member of MWAM

I confirm my current IAM Associate Membership expires on: \_\_\_\_/\_\_\_\_/20\_\_\_\_ (insert date on card)

I agreed to my details being stored on a computer system on the understanding that they will only be used for group administration and will not be disclosed without my permission.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

If you have not already do so and you are willing and eligible please complete a Gift Aid Declaration. This will enable the group to reclaim the basic rate tax from the Inland Revenue on your subscription.

**Geoff Smith, MWAM Secretary  
Heddfan, Cortay Park, Llanyre, Llandrindod Wells, Powys LD1 6DT**

