



SSM MEMBERSHIP APPLICATION FORM – 2010

Please Print Clearly

NAME

ADDRESS.....

.....

POSTCODE

HOME TEL MOBILE

EMAIL.....

DATE OF BIRTH /..... /..... (If under 18, a Parent / Guardian must also sign)

MACHINE

Make..... Model..... Engine Size (cc)

I wish to join SSM and agree to abide by all rules and regulations governing SSM. I agree to be bound by decisions made by the race organisers and those acting with their authority. I further agree that the decision of the Race Director/Clerk of the Course and/or any Technical Scrutineer will be final.

Signed

Signature of Parent/Guardian

All new Members please give a brief history of any previous race experience as this will help us select the Wright group for you.

.....

.....

.....

RACE NUMBERS

If you are a new member a number will be allocated to you by the SSM. All existing members will be using the same Numbers as 2009 unless otherwise instructed by SSM.

Single Rider membership £40.00, any Additional Family Rider £10.00 i.e. Son, Father, Brother, Sister etc. (Immediate family only).

Please send your Cheque made payable to **SSM.UK with a stamped addressed envelope to: SSM.Oakville ,Oaklea Lane ,Whaddon, Salisbury, Wilts. SP5 3DY**

Please Note A.M.C.A Licence Application can only be sent on receipt of this form with your membership cheque and stamped addressed envelope.