

RoSPA Advanced Drivers and Riders East Kilbride Group

I wish to apply for membership of RoAD	JAR East Kilbride CA	R SECTION		MOTORCYCLE SECTION	<u> </u>
First Name(s):		Surname:			
Address:					
Town/City:		Region:			
Postcode:		Telephone:			
Email:		Mobile:			
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Joining Fee - £30 This fee includes a free copy of	'The East Kilbride the RoADA	AR'	My payment is enclosed		
Roadcraft and Highway Code	Account No – 00824481 Sort Code - 80-06-64		I have paid by electronic transfer		
Subscriptions not paid within 14 days of joining will mean your membership will lapse. Payment can be made by electronic transfer to the Groups bank account, details above. If you pay electronically, please email the treasurer at treasurer.ekgroadar@gmail.com Tuition is free to members, however, motorcycle tutors incur cost because they use their own vehicle. Consequently, motorcycle trainees are required to make a contribution of £12 to recompense their tutor's expenses for each lesson.					
DECLARATION					
Please read the following Declaration carefully . If you do NOT hold all of the required valid documentation listed then you then you are not eligible to drive or ride with the RoSPA group.					
I confirm that I hold a valid current driving licence and that I have appropriate insurance for my vehicle. either personally or via my employer, and the vehicle, if appropriate, has valid MOT and tax. I also confirm that these will be in place throughout the duration of my RoSPA Advanced Drivers and Riders membership.					
I confirm that I am fit to drive or ride and not under the influence of any drug (including prescribed medication that may adversely affect my fitness to drive or ride). I will wear corrective eyewear while driving or riding if my eyesight requires it. I am aware that I am responsible for all driving or riding decisions and I will make my Tutor aware if I become distracted. I agree that any advice or direction given will require my diligence to be applied safely. If I have any doubt I will ask for clarification before following the advice or direction.					
I understand that my membership record administration purposes and that I have us/privacy-policy.		•		•	<u>:</u> -
SIGNED: DATE:					
The completed Membership Application Group Treasurer, 60 Carnwath Road, Ca				_	ıe,