



# THE CAPE VINTAGE MOTORCYCLE CLUB

P.O. Box 109  
Bergvliet  
7129  
South Africa  
[info@cvmc.co.za](mailto:info@cvmc.co.za)  
[www.cvmc.co.za](http://www.cvmc.co.za)

## APPLICATION FOR MEMBERSHIP

Surname \_\_\_\_\_ Initials \_\_\_\_\_

Known name (for name tag) \_\_\_\_\_

Wife's name (if applicable) \_\_\_\_\_

Postal address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postal code \_\_\_\_\_

I. D. Number.

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Phone: home \_\_\_\_\_

Phone: business \_\_\_\_\_

Cell \_\_\_\_\_

E mail address \_\_\_\_\_

Occupation \_\_\_\_\_

Full details of motorcycles on the road: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Full details of motorcycles still to be restored: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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## Fees

**Joining fee:** R70.00    **SAVVA Indemnity form:** R5.00    **Annual membership fee:** R150.00

Are you a member of another SAVVA Club? Yes/No

If Yes which Club \_\_\_\_\_

Are you a member of any other Motoring Club? Yes/No

If Yes which Club \_\_\_\_\_

State briefly your reasons for wanting to join the Cape Vintage Motorcycle Club

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

It is required that members **KNOWN TO YOU** sign as your Proposer and Seconder.

**DO NOT APPROACH ANYONE YOU DO NOT KNOW PERSONALLY.** However, if you are unable to obtain a Proposer or Seconder or both, please state the reason for wanting to join and your application will still be considered.

Proposed by (print) \_\_\_\_\_ Signature \_\_\_\_\_

Seconder by (print) \_\_\_\_\_ Signature \_\_\_\_\_

### IMPORTANT!

**(i) Proposer and seconder must have been members of the club for at least 12 months.**

**(ii) Entrance fee as well as subscription fee plus all other moneys must be submitted with the application form.**