



MG Car Club of Toronto Membership Application / Renewal

PLEASE PRINT CLEARLY:

Membership No.: _____

Full Name:
Last Name First Name

Address:
Street Address

City

Province

Postal Code

H. Phone: - -
Area code Phone Number

Cell #: - -
Area code Phone Number

Email 1:
Primary e-mail address

Email 2:
Secondary (spouse/partner) e-mail address

Spouse / Partner:
Last Name

First Name

First Vehicle:
Year Marque Model

Second Vehicle:
Year Marque Model

Are you willing to help out at club meetings / events: **Yes** **No**

Comments: _____

By submitting this form, I make formal application to the executive of the MG Car Club of Toronto Inc. for new / renewal membership. I will abide by the By-laws of the club, if my application is accepted.

Signed: _____

NEW APPLICATION

RENEWAL

Please mail this form, enclosing your payment, to:
(Note: New Post Office Address)

MG Car Club of Toronto Inc.
364 Old Kingston Rd., P. O. Box 97505
Scarborough, ON M1C 4Z1 Canada

You may also Join or Renew online at: <http://www.mgtoronto.com/application.html>

Annual Fee: \$45.00 in Canadian funds

Please make all cheques payable to **MGCCT**

Visa or MasterCard # _____ Expiry: _____ / _____
(mm) (yy)

Name: _____
(as it appears on card) (signature)

(Please note that memberships are for the calendar year, January 1st through December 31st.)
If you have any questions about this application form, please contact our Membership Chair by e-mail at membership@mgtoronto.com