**PŘIHLÁŠKA**

ke členství ve

**Veterán Car Clubu Česká Lípa**

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| **Žadatel o členství:** | |
| Jméno ......................................... | Příjmení ............................................. |
| Titul ............................................ | Datum narození ................................. |
| **Bydliště:** | |
| Ulice ........................................... | Č.p. ....................... |
| Obec ........................................... | PSČ ...................... |
| **Spojení:** | |
| Telefon ....................................................................................................................... | |
| E-mail ........................................................................................................................ | |
| **Vlastněná vozidla:** | |
| ...................................................................................................................................... | |
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| Byl jsem seznámen se stanovami VCC Česká Lípa | |
| Datum ........................................................................................................................ | |
| Podpis žadatele .......................................................................................................... | |
| Žadatel uhradil vstupní poplatek .......................................................................... Kč | |
| Podpis člena výboru .................................................................................................. | |