



# GoldWing Owners Club of Ireland Ltd

## 2023 Membership New/Renewal Form

Insert "S" for Single or "J" for Joint Membership in the Box

Member 1 details marked\* will be printed on the membership card and may be included in a future bar code.  
With Joint Membership, Member 2 name will be printed on the card.

* Member 1 Name											
* Title	Mr		Ms				* Date of birth (optional) dd/mm/yyyy	/	/		
Address											
Town							County				
Country							PostCode				
Email											
Mobile No							Landline				
Email and phone numbers are requested for GWOCI contact purposes to keep you updated on Club news and events											

Member 2 Name											
Email											
Mobile No (optional)											

Bike			
Model	Solo	Sidecar	Trike
cc	O	O	O
Reg No.			

Renewal Fees	
Single Membership	€20.00
Joint Membership	€25.00

New Membership Fees	
Single Membership	€35.00
Joint Membership	€45.00

Do you allow your name, phone no./town/county to be included in membership list for GWOCI members	Yes	No		
Would you like your name, phone no. and town to be in the GWEF Help Guide? (limited number)	Yes	No		
Do you have knowledge of any other languages?	Y	N	If Y, Please state	
Are you a member of any other GWEF Clubs?	No	Yes	If Yes, please give details	

Cheque, Bankers Draft or Postal Order made payable to Goldwing Owners Club of Ireland Ltd. If payment is made by bank transfer (IBAN: IE82 AIBK 9341 7840 8800 03. BIC: AIBKIE2D) **your name & m/ship number should be quoted in the payment.** Please complete this form in full. Forms should be sent to the Membership Secretary: Maureen Cowan, 48 Brighton Square, Rathgar, Dublin 6 D06 R3K7  
Mobile phone: +353 (0)879717565 Email: Maurent.Cowan@gmail.com You may also pay by Revolut

Payment method (tick one)	Cash	Cheque	Bank Draft/Postal Order	Bank Transfer	Revolut
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Check the Club Website (www.gwoci.com) & Facebook Page (Goldwing Owners Club of Ireland) regularly for information updates

I/we have read and accept the constitution of GWOCI (published on our club web site www.gwoci.com)

Applicant's signature:

Joint Applicant's Signature:

### For Membership Secretary use

Date Received	/	/	Total Paid		Payment method	
M/Ship No		Full	Associate		Life	Cards sent / /
New Member(s)	Patche(s)		Pin(s)		Sticker	Club info