

AM CARD APPLICATION FORM

Date of Application:

Renewal Date:

Membership Number:

Customer Name:

Postal Address:

.....

..... Postcode:

Home Tel: Mobile:

Email:

MEMBERSHIP FEE:

Price £.....

Total:

RECEIPT:

I acknowledge receipt of £ CHEQUE/CASH/CREDIT CARD.

Advisor: Signature:

DEAR CUSTOMER

Thank you for choosing to become a member of the AM Club.

By filling out this form you are agreeing to pay the sum of £5.00 in return for a yearly membership of the AM Club starting from the date at top of this form.

By signing the form below you are allowing Willis Moss Ltd T/A Assured Mobility the permission to send you details on promotions, offers and any additional services that Assured Mobility and its affiliate businesses might have to provide.

Signature: Print Name:

TERMS AND CONDITIONS:

This membership is valid for 1 year from the date stated at the top of this form. You can cancel the membership at any time by informing your local Assured Mobility store. Cancelling the membership will disqualify you from any discounts available on the AM Club scheme. If you wish to re-instate your membership there will be an additional fee of £5.00 to pay.

The membership is non-transferable. 1 Membership per person.

At the end of your membership period Assured Mobility will contact you to see if you wish to re-new for another year.