



BRITISH CAR COUNCIL INC

Membership Form / Invoice
(please print clearly)

April 30, 2026

[This Form Becomes Your Invoice Once Completed]

Club Name: _____

Club Mailing Address: _____

Club Telephone: _____ Fax: _____

Club Web Site: _____

BCCI Representative: _____

Rep Address: _____ Rep Phone: _____

_____ Rep Fax/Cell: _____

Rep E-mail: _____

Fee Calculation & Invoice Amount (This Form Becomes Your Renewal Invoice Once Completed)

Basic Annual Club Membership to BCCI (May 2026 through April 2027) \$ **40.00**

Additional Insurance 'Per Club Member' Fee _____ X \$1.50 per member \$ _____

(enter the number of members in the club at the end of the last calendar year here \uparrow then multiply by 1.5 and enter the amount here) \uparrow

Total Amount Due: (add the basic membership & the additional fee & enter the total due) \$

Complete this form in black ink.

Payment can be made via e-Transfer to this e-mail address- \rightarrow paybcc@gmail.com

Return the completed form to the address below.

If paying via cheque, include it with your completed form to:

**British Car Council
[President]
1315 Kilmarnock Road
Jasper, Ontario
K0G 1G0**

AN ADMINISTRATION FEE OF \$50 WILL BE CHARGED ON LATE RENEWALS (after the Annual General Meeting)

CLASSIC AND ANTIQUE AUTO CLUBS INSURANCE FORM (2026)

[limit of liability: \$5 million]

Name of Club: _____

Club Contact Name: _____

Club Contact Address: _____

Year Club Started: _____ [YYYY] Current Number of Members: _____ [include all members, directors, officers]

List subsidiary or membership in other clubs if any: _____ [subsidiary clubs that report to your club OR other groups your club belongs to]

Types of Vehicles Unique to the Club: _____ [list Marques or generic groups included; not individual models]

Types of Events Attended: _____ [ie: automobile display, technical session, cruise night gathering, skills display, funkhana, club meeting, flea market, swap meet, hobby gathering, etc]

Number of Events Attended Annually: _____ Usual Location of the Events: _____ [meetings & other events] [restaurants, city parks, fairgrounds, parking lots, other]

Does the club host events outside the Province or outside Canada and do you host events there? Yes ___ No ___
If yes, describe in detail _____ [attending an event is NOT Hosting an event. Check Yes only if you actually Host an event outside the Province or country]

Does the club travel outside the Province? Yes ___ No ___ If yes, where? _____ [if yes, identify the Province and / or States]

Does the club have fundraisers? Yes ___ No ___ If yes, what kind _____ [other than annual fees or dues from members] [for charitable donations, for special programs, others?]

Does the club participate in other activities? Explain: _____ [as a club at sports events, charity support, auctions, volunteer work, etc, not related to the club automotive activity]

DIRECTORS & OFFICERS LIABILITY INSURANCE FORM

1) Legal Structure _____ [Corporation, Business Association, Not-For-Profit Group, Community Association, Not Incorporated, Foundation, Registered Society, other]

2) Limit of liability: \$2,000,000.

3) The officer designated to receive any and all notices from the insurer or their representatives concerning this insurance:

Name: _____
Mailing address: _____
Phone Number: _____

4) Size of operating budget (revenue plus cash assets)

Current year: \$ _____

Anticipated for next year: \$ _____

Annual Dues from members: \$ _____

Estimated donations/contributions from the general public: \$ _____

5) Number of: Directors _____ Officers _____ Volunteers _____ Members _____
[Executive group members] [non-Executive group officials] [non-paid / non-member] [identifiable members]

6) List all affiliated organizations & related groups: _____ [other clubs and organizations that your club reports to]

7) How frequently does the Board of Directors meet? _____ [weekly, monthly, quarterly, annually, other]

8) Does each Director have a formal job description, clearly defining their scope of duties? Yes ___ No ___

9) In the past 5 years, has similar insurance been declined, cancelled, non-renewed or refused? Yes ___ No ___

10) Does the organization or any other person(s) proposed for this insurance have knowledge or information of any actual or alleged negligent act, error, omission, misstatement or misleading statement or breach of duty which might give rise to a future claim? If yes, provide details on back. Yes ___ No ___

Club Representative
Name & Signature: _____

Date: _____

***** Complete This Form In Black Ink And Return It To BCCI *****