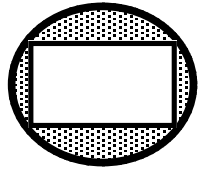


MORRIS MINOR CAR CLUB OF NSW MEMBERSHIP RENEWAL FORM



Membership Number



Personal Information

Please print in block letters

Members Name For family membership please give both first names.

Address Birthday (Day/Month) 1st member 2nd member

Suburb State Postcode

Phone H Phone W Mobile Ph

Fax No Email

Vehicle Information

There is space available for upto four Morris Minors to be listed that are owned by the member. Please list your primary car first. (ie car most often used) If not already done so please include a photo of your car/cars.

Model 1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/>	Body Type 1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/>	Colour 1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/>	
Yr model 1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/>	Rego No 1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/>	Engine Type 1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/>	Engine Size 1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/>
Engine No 1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/>	Chassis No 1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/>		
History 1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/>			

I wish to pay for SINGLE\$35
 FAMILY.....\$40

I have paid by CASH.....
 MONEY ORDER...
 CHEQUE.....

RETURN FORM AND PAYMENT TO THE
 MORRIS MINOR CAR CLUB OF N.S.W. (INC.)
 PO BOX 605
 GRANVILLE NSW 2142

Signature Date / /

..... office use only

Date Paid Receipt No Valid Yr Logged