

ASSOCIATE MEMBERSHIP FORM

ISNEE MOTORSPORTS

MEMBERSHIP DURATION (WRITE IN YEARS): _____

PHOTO

PAYMENT DETAILS: DD/CHEQUE NO.

NAME:											
AGE:			DATE OF BIRTH:						SEX:		
EMAIL ID:						CONT NO:					
PERMANENT ADDRESS:											
STATE:						POSTAL CODE:					
COLLEGE/UNIVERSITY/COMPANY:											
DESIGNATION:						RELAVENT EXPERIENCE:					
HOME ADDRESS:											
PHONE:						POSTAL CODE:					
CITY:						STATE:					
COLLEGE/UNIVERSITY/COMPANY ADDRESS:											
PHONE:						POSTAL CODE:					
CITY:						STATE:					

Read carefully

1. Form must be filled in block letters
2. Fill the payment information correctly in the given box
3. The photograph must not come out of the box
4. Demand Draft must be withdrawn in favour of **"ISNEE MOTORSPORTS"** payable at Punjab National Bank, Basta (Bijnor, Uttar Pradesh).
5. Fill this form on computer and then print it, no forms written with pen will be accepted

Candidate Signature _____

Date: _____

Place: _____