ASSOCIATE MEMBERSHIP FORM

ISNEE MOTORSPORTS	
MEMBERSHIP DURATION (WRITE IN YEARS):	
PAYMENT DETAILS: DD/CHEQUE NO.	РНОТО
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:	
MOTORS	
PHONE: POSTAL CODE:	
CITY: STATE:	
DEDEFINED	
Read carefully	
 Form must be filled in block letters Fill the payment information correctly in the given box The photograph must not come out of the box Demand Draft must be withdrawn in favour of "ISNEE Motorsports Pvt. Ltd." payable at Punjab National Bank, Basta (Bijnor, Uttar Pradesh). Fill this form on computer and then print it, no forms written with pen will be accepted 	

Candidate Signature
Date: _____
Place: ____