



# Sarnia Street Machines

P.O. Box 30

Brights Grove, ON N0N 1C0

## Membership Registration Form

Name: \_\_\_\_\_ Spouse: \_\_\_\_\_  
 Children under 20 living at home: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Vehicle Make (List up to 2 vehicles)	Model	Year

Sponsor's Name / Club Affiliation: \_\_\_\_\_ Phone: \_\_\_\_\_  
 New Member's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### *Completion by Treasurer*

Paid: \_\_\_\_\_ Date: \_\_\_\_\_ Membership Card Issued: \_\_\_\_\_ Constitutions Issued: \_\_\_\_\_

President's Signature: \_\_\_\_\_ Date: \_\_\_\_\_