

Indian Owners Register

Membership Application Form

To join IORNZ simply print this page, fill out the details, include payment of \$30 and post to:

IORNZ Membership
26 Ames St
Paekakariki 5034

Name: _____

Address: _____

_____ Post Code: _____

Phone: _____ Mobile: _____

Email: _____

Indians owned

Model	Year	Engine No.

Disclaimer:

By signing this form I hereby hold blameless IORNZ – The Indian Owners Register of New Zealand – and/or any of it's members or committee for any loss or accident that may occur.

Signed: _____

Name: _____ (please print)

Date: _____