

# MILLENNIUM MOTORIST FOUNDATION OF CANADA

## Membership Application Form



Membership No: \_\_\_\_\_

Last Name

First Name

Address

Apt. No

City

Province

Postal Code

Date of Birth

Tel.

Cel.

D

M

YR

Fax.

Email

### VEHICLE INFORMATION - 1

Year

Make

Model

VIN #

Odometer Km

### VEHICLE INFORMATION - 2

Year

Make

Model

VIN #

Odometer Km

Membership Option: Associate Member \$10.00

Active Member \$79.00

I certify that the above information is correct and subscribe to the objectives of MMFC.

Signature

Date

FOR OFFICE USE ONLY