

**Triumph Sports Owners Association
Membership Application Form
Send to: PO Box 1269 South Perth WA 6951**



Name. _____

Address _____

Phone _____ Home _____ Work _____

Email Address _____

Name(s) of any Association members known to you

Details of your Triumph:

Model: _____ Year: _____ Rego: _____

Colour: _____ Commission No.: _____

Any other Particulars: _____

Details of your non Triumph:

Make.....Model.....Year.....

Yearly membership fees: Family \$55.00. Single \$45.00

Names of others in family membership _____

Office use only

Date Joined: _____ Membership No.: _____