

CORVAIRS of NEW MEXICO (CNM)

Application for Membership



Date: _____

Last Name: _____ First Name: _____ MI: _____

Spouse: _____ First Name: _____ MI: _____

Street Address: _____ City: _____ Zip Code: _____

Telephone Number: _____ Occupation: _____

Birthdate: _____ (MM/DD/YY) Spouse Birthdate: _____

Anniversary: _____

Mechanical Experience: _____

Other Club Affiliations: _____

Auto Information:

Year of Car: 196__ Color _____ Type: _____

Engine Displacement (Cubic Inches): _____ Horsepower _____

Any engine modifications? _____

What is Rated Horsepower After Modifications? _____

Why are you interested in CNM: _____

As a member of Corvairs of New Mexico, what type of events would you like to participate in or be a spectator to ?

Races: _____ Rallies: _____ Gymkhanas: _____ Autocrosses: _____ Parades: _____

Picnics: _____ Caravan trips: _____ Scavenger hunts: _____ Community Drives: _____

Car Shows: _____ Other: _____

Signature: _____

Please List other Corvairs on back of this application)