



Illinois Sports Owners Association

Application For Membership

Name: _____ Other: _____
 Preferred Name: _____ Preferred Name: _____
 Employer: _____ Employer: _____
 Occupation: _____ Occupation: _____
 Work Phone: _____ Work Phone: _____
 Fax: _____ Fax: _____
 E-Mail: _____ E-Mail: _____
 Birthday (MMDD): _____ Birthday (MMDD): _____

Mailing Address and Home Phone

Street: _____ Apt.: _____
 City: _____ State: _____ Zip: _____
 Home Phone: _____

Affiliations with other sports car clubs: _____

What do you hope to gain from ISOA Membership? _____

TRIUMPH(s) you currently own:

Specific Interests:

Model	Year	Condition
_____	_____	_____
_____	_____	_____
_____	_____	_____

Rallye_____	Social Event_____
Slalom_____	Technical_____
Tour_____	
Other_____	

Signature of Applicant: _____ Date: _____

Annual dues: \$25.00 plus \$10.00 per person one-time charge for name tag, etc.

Turn in Membership Application at meeting or mail to: **Tim Buja, 1173 Butler Rd, Rockford, IL 61108-4702**

For more information contact:	Jack Billimack	Crystal Lake	(815) 459-4721
	Ann & Tim Buja	Rockford	(815) 332-3119
	Phil Fox	Burr Ridge	(630) 662-7721
	Irv Korey	Highland Park	(847) 831-2809
	Sheri Pyle	Itasca	(630) 773-4806

Monthly 7:00pm - the first Sunday of every month (unless otherwise announced)
Meetings: Mack's Golden Pheasant, 668 W. North Avenue, Elmhurst, IL (junction IL 83 & IL 64)