



## Application for Membership/Renewal

Today's date: \_\_\_\_\_

Date Approved \_\_\_\_\_

Date Attended First Meeting: \_\_\_\_\_

Date Attended Second Meeting: \_\_\_\_\_

Name: \_\_\_\_\_

Birthday: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Spouse/Significant Other: \_\_\_\_\_ Birthday: \_\_\_\_\_

Children: \_\_\_\_\_ Birthday: \_\_\_\_\_

Children: \_\_\_\_\_ Birthday: \_\_\_\_\_

(MEMBERS Children are under parents membership until 18 years of age. Please use back of sheet for additional family)

### Please Check One

**\_\_\_ Active Membership:** Join Club (attend 2 meetings) Pay \$20 dues per year; Welcome to attend all club functions; Work at least 2 of the 5 shows; Free admission to the car show as long as you are working that show; have voting rights

**\_\_\_ Associate Membership:** Join Club (attend 2 meetings) Pay \$20 dues per year; Welcome to attend all club functions when possible; **not required to work at shows**; No voting rights

### Vehicle Information:

**Make:** \_\_\_\_\_ **Model** \_\_\_\_\_ **Year:** \_\_\_\_\_ **Style:** \_\_\_\_\_

\_\_\_\_\_

### Exterior Features/Modifications:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Interior Features/Modifications:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Tech Specialties:**

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**Special interests/Hobbies:**

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**NOTE: IF YOU NEED ADDITIONAL SPACE, PLEASE USE THE BACK OF THIS FORM**

**DUES May be mailed to:**

**Pottstown Classics Car Club 3 Sunset Drive Douglassville, Pa.19518**

**MAKE CHECKS PAYABLE TO: Pottstown Classics Car Club**

**We meet the first Monday of every month unless there is a holiday, which we will meet either the next day or the following Monday. The meeting starts at 7:00 PM.**

**Meetings are held at: \_\_\_\_\_**