

APPLICATION FOR MEMBERSHIP

Cape Cod Classics Car Club

Circle one: **NEW MEMBERSHIP / RENEWAL / STUDENT**

Date: _____ Membership year: _____

Name: (Primary) _____

Name: (Associate*) _____

**Open to any household member(2) when a Primary Member joins and has voting & input rights on club matters.*

Home Address: _____

Mailing Address: _____

Contact Phone: _____ Do you want an ID badge? Y N

Alternate Contact Phone: _____

Email: _____ Please print carefully

Vehicle(s): Use back of this application for additional vehicles

Year: _____ Make: _____ Model: _____

Year: _____ Make: _____ Model: _____

Year: _____ Make: _____ Model: _____

- Membership Fee (1 yr) Primary.....\$25.00
 - Associate Member.....\$10.00
- Membership Fee (2 yr) Primary.....\$40.00
 - Associate Member.....\$15.00

Fill out the above information and return this form with your payment. Make check payable to Cape Cod Classics Car Club Foundation and send to PO Box 1349, South Dennis, MA 02660, Attn: Treasurer

Our club welcomes all vehicles of interest and all years

Dues are based on a calendar year and renewed every January.

Website: www.capecodclassics.org



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