

**Cape Cod Classics Car Club
APPLICATION FOR MEMBERSHIP**

Date: _____ Membership Year _____

Name: (Primary) _____ Birthday (Mo & Day) _____

Name (Associate) _____ Birthday (Mo & Day) _____

Open to any household member when a Primary Member joins and has voting & input rights on Club matters.

Home Address: _____

Mailing Address (if different) _____

Contact Phone: _____

Alternate Contact Phone: _____

DO YOU WANT AN ID BADGE? Y N
IF 'YES' LAMINATED? Y N

E-Mail: _____

Vehicle(s). {Use back of this application for additional vehicles}

Year: _____ . Make: _____ . Model: _____

Year: _____ . Make: _____ . Model: _____

Year: _____ . Make: _____ . Model: _____

- () Membership Fee (1yr) Primary -----\$25.00 () Associate Member-----\$10.00
() Membership Fee (2yr) 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 and send to PO Box 1349, South Dennis, MA 02660, Attn. Treasurer
Our club welcomes all vehicles and all years, although there is a preference for American made vehicles.

Dues are based on a calendar year and renewed every January. Members who join the club after September 1st pay \$15.00 for primary membership and \$5.00 for associate membership for the remainder of the calendar year. NO 2 year membership is offered after September 1st, can be requested on renewal.

WEB SITE: www.capecodclassics.org or Visit us on Facebook