



# New Membership Form

Return this form and payment to:

Northern Colorado Model A's  
PO Box 2697- Loveland, CO 80539-2697

Dues for the first year are \$20.00 for family year membership

Model A's

Date:

## Applicants Name:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Model A(s) \_\_\_\_\_

## Spouse's Name:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Applicant's Signature

Spouse's Signature

Members Name Badges are an additional \$10.00 Per badge.

Name Badge for new Member Y N

Additional badge for spouse. Y N

Additional Badge for Children Y N

Permission to publish my phone number(s) & email in future Membership Rosters? Y N