

Northeast Georgia Antique Auto Region
APPLICATION FOR MEMBERSHIP

PERSONAL INFORMATION: **PLEASE PRINT**

NAME _____ SPOUSE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

TELEPHONE _____ OCCUPATION _____

MAKE/YEAR OF ANTIQUE VEHICLES OWNED: It is not necessary to own an antique to be a member

SPECIAL INTEREST/SKILLS

NATIONAL MEMBERSHIP STATUS: Are you a member in good standing of the national Antique Automobile Club of America? Yes: _____ Current AACA national membership number _____

No: _____ You must be a member of national AACA in order to become a member of a local region. Please submit AACA national dues direct to Hershey PA. Application attached to this one.

SPONSORING MEMBER: _____ AACA # _____

Annual Local dues are \$10 per calendar year. Please make check payable to:
Northeast GA Antique Auto Region

Mail Application with Check to: Cleve McAfee PO Box 1777 Cleveland GA 30528

BIRTHDAY: MONTH _____ DAY _____ SPOUSE: MONTH _____ DAY _____

ANNIVERSARY: MONTH _____ DAY _____

E-MAIL : _____