



Since September 1964

MEMBERSHIP APPLICATION

PACIFIC CASCADE MUSTANG CLUB
PO BOX 58582
RENTON WA 98058-1582



Member of MCA

ID # _____
Date _____

General Information

Last Name		First Name		Your Birthday Month	
Spouse's Name		Children Name(s)		Spouse's Birthday Month	
Mailing Address					
City		State	Zip	Home Phone	
Email Address				Cell Phone	

Membership & Renewals \$20. <i>Cash, Check or Credit Card</i> Make checks payable to: PCMC			Requirements: Attend two Pacific Cascade Mustang Club functions Be a current licensed driver with insurance Own a FORD powered vehicle or Ford enthusiast		
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Mustang Information

Make/Model/Year			Make/Model/Year		
Make/Model/Year			Make/Model/Year		

Areas Of Interest And Assistance

Club Activities that Interest You <input type="checkbox"/> Monthly Meetings <input type="checkbox"/> Car Shows <input type="checkbox"/> Racing <input type="checkbox"/> Maintenance & Technical Advice <input type="checkbox"/> Tours <input type="checkbox"/> Social Activities Other: _____		Check Areas You Would Like to Help <input type="checkbox"/> Annual Car Show Organize Car Show Outings <input type="checkbox"/> Publicity Media Write Articles <input type="checkbox"/> Assist with Membership <input type="checkbox"/> Serve as a Board Member <input type="checkbox"/> Assist with Tours or Other Events <input type="checkbox"/> Other Suggestions Other: _____	
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I, the applicant, hereby agree that while I am a member of Pacific Cascade Mustang Club, I will possess a valid Washington State Motor Vehicle Operators License and Liability Insurance in compliance with the Washington State Financial Responsibility Act whenever I am participating in any CLUB activity that involves the operation of a motor driven vehicle.

Signature of Applicant		Date	Parent or Guardian's Signature (if Applicant is under 18)
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TO ORDER A NAME BADGE(S), please print how you would like the name(s) to appear, your cost \$5.00ea	YOUR NAME BADGE	SPOUSE'S OR OTHER NAME BADGE
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Area Reserved For Membership Chairperson

NEW MEMBER APPLICATION & DUES RECEIVED ON _____ by _____ AMOUNT _____ + BADGE(S) _____	
DATE NAME BADGES ORDERED _____	DATE DELIVERED _____
DATE NEW MEMBER RECEIVED WELCOME PACKET _____	
RENEWAL APPLICATION & DUES RECEIVED ON _____ by _____ AMOUNT _____	
DATE CASH -OR- CHECK GIVEN TO TREASURER ON: _____	CHECK # _____