

MEMBERSHIP APPLICATION

Antique Automobile Club of America North Carolina Region Triangle Chapter AACA

| First Name | | Last Name | | |
|--|---|--------------------------------------|------------------------|---|
| Address | | | | |
| City | | State | Zip Code | |
| Spouse's Name: | | Home Phone No. | | |
| Email Address: | | Cell Phone No. | | |
| Cars Owned (Year/Moo | del) | | | |
| Note: to Join the Triang | gle Chapter you must a | llso join or belo | ng to AACA Nationa | al and NC Region. |
| | \$25.00 \$45.00 er of AACA National: riangle Chapter dues a s Application Form and orm is at: https://aaca.o | npply. d the AACA Nabrg/wp-content/ | ntional Application fo | Total \$70.00 \$42.50 \$70.00 orm when submitting. The 1_Membership_ap.pdf |
| Note: Above dues can l | be combined on a single | le check, and w | e will forward to Nat | ional and NC Region |
| Mail To: Ken Powell 4513 Wood Raleigh, N.0 | = | | | |
| Phone: 919 Email: kgp | -638-0756 8888@gmail.com | | | |
| Applicants Signature | | Data | | |