

# MEMBERSHIP APPLICATION/RENEWAL



IF RENEWAL, MEMBERSHIP NUMBER: \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

PROVINCE/STATE: \_\_\_\_\_ POSTAL/ZIP CODE: \_\_\_\_\_

e-mail ADDRESS: \_\_\_\_\_

CAR DESCRIPTION YEAR: \_\_\_\_\_ MODEL: \_\_\_\_\_

EXTERIOR COLOUR: \_\_\_\_\_ INTERIOR COLOUR: \_\_\_\_\_

SPECIAL FEATURES: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SEND THIS APPLICATION WITH \$25 TO:**

**Ontario Camaro Club  
P.O. Box 324  
West Hill, Ontario  
M1E 4R8**

**[www.ontariocamaroclub.com](http://www.ontariocamaroclub.com)**