



Membership fees are \$60 per family per year, and runs from October to September
All information provided by applicants is treated as strictly CONFIDENTIAL!

| | SURNAME | FIRST NAME | OCCUPATION |
|----------|----------------|-------------------|-------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |

| | |
|-------------------|--|
| ADDRESS | |
| POSTCODE | |
| EMAIL | |
| PHONE/CELL | |

VEHICLE DETAIL SECTION – If more than one please list on the back of the form.
To be eligible for membership you must own an American classic car that is pre-2000 model year and must be of historical interest.

| | |
|---------------|--|
| MAKE | |
| MODEL | |
| YEAR | |
| ENGINE | |

DECLARATION – I/We hereby agree to abide by the rules and guidelines of the American Classic Car Club Auckland, and hold blameless the club and any or all of its officers from any liabilities arising during the term of my/our membership. I/We also realise that in forwarding this application, I/We agree to my/our name(s), address and contact details, and any images/photos being passed on to the committee for club use.

| | |
|---------------|--|
| SIGNED | |
| NAME | |
| DATE | |

Please email to: cruisepaper@gmail.com
Or post to : American Classic Car Club Auckland, 73 Stanaway Street, Hillcrest, Auckland 0627

American Classic Car Club use only:-

| | |
|-----------------------|------------------------|
| Application received- | Payment info. sent- |
| Payment received- | Membership info. sent- |