OVAC Membership/Renewal Form

|  |  |  |  |
| --- | --- | --- | --- |
| Application Date |       |  |  |
|  |
| Member Name |       |       |       |
| Last | First | Spouse/Significant Other |
| Mailing Address |       |
|       |
|       |
| Home/Cell Phone |       /       |
| EMAIL |       |

|  |
| --- |
| Membership Instructions |
| 1. Fill in all information requested on this form
 |
| 1. Return this sheet with dues payment. ($25)
 |
| 1. Make Checks Payable to OVAC
 |
| 1. Mail dues and membership form to OVAC OLYMPIC VINTAGE AUTO CLUB

 P. O. Box 1614, Silverdale, WA 98383 |
| 1. Check One:
 |
|  | I want to Receive *The Duster* via Email [ ]  |
|  | I want to Receive *the Duster* via US Mail [ ]  |
| 1. Total Payment Enclosed $\_     \_\_\_\_\_\_\_\_\_\_\_
 |
|  |
| List your Antique, Vintage, Special Interest &/or Collector Cars >30 years old |
| Year, Make Model | Year, Make, Model |
|  1       |  2       |
|  3       |  4       |
|  5       |  6       |
|  7       |  8       |
|  9       | 10       |
| 11       | 12       |
| 13       | 14       |
| 15       | 16       |
| 17       | 18       |
| 19       | 20       |
|  |
| I certify that I have read, understand and will comply with the OVAC Touring Guidelines. |
|  |
|  Signature |
|       |
|  (Spell Name) |