

MCCDC MEMBERSHIP APPLICATION



Membership runs from January 1 - December 31

To become a new member or to renew your membership, please complete this form and send with a check for \$30.00 (**\$45.00** for Joint Membership) made out to MCCDC. Mail to MCCDC c/o Lisa Shriver, Membership/Registrar, 11038 Country Club Road, New Market, MD 21774

Telephone: (703) 861-7101 Email: shriverla@gmail.com

FOR CLUB YEAR ENDING DEC. 31, 2019 *New* *Renewal* *Note changes* *Renewals due 12/31/2018*

MEMBERSHIP INFORMATION

DO NOT INCLUDE INFORMATION IN CLUB DIRECTORY

NAME _____ Joint Member _____

ADDRESS _____

CITY _____ STATE _____ COUNTRY _____ ZIP/POST CODE _____

HOME TELEPHONE _____ OFFICE TELEPHONE _____ ext. _____

CELL PHONE/FAX/OTHER _____ EMAIL _____

Necessary for you to receive periodic email about events.

CAR INFORMATION

DO NOT INCLUDE INFORMATION IN CLUB DIRECTORY

YEAR	MODEL	TYPE	COLOR(S) Body/Wings	NAME of Car	SPECIAL CHARACTERISTICS
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1. _____

2. _____

3. _____

4. _____

MEMBER ACTIVITY / INTEREST AREAS

CIRCLE OR UNDERScore ANY/ALL INTERESTS

ACTIVITIES PRESENTLY ENGAGED IN:

RESTORATION - MAINTENANCE - WEEKEND ROAD TRIPS - VACATION ROAD TRIPS - RALLIES - AUTO SHOWS - CLUB CONCOURS - AAC RACING - VINTAGE RACING - SCCA RACING - AUTOCROSS - OTHER _____

ACTIVITIES I WOULD LIKE TO PARTICIPATE IN:

TOURS - WEEKEND GETAWAYS - BRUNCHES - RALLIES - GYMKHANA - CONCOURS - AUTOCROSS - HILL CLIMBS - FIELD TRIALS - VINTAGE RACING - TECH SESSIONS - HOST A NOGGIN - OTHER _____

I WOULD ATTEND ACTIVITIES ON: WEEKENDS - SATURDAYS - SUNDAYS - WEEKDAYS

I HAVE THIS GREAT IDEA! _____

I WANT TO VOLUNTEER FOR: OFFICE: _____ COMMITTEE: _____ EVENT: _____