

NATURAL STATE MODEL A CLUB

Membership: Original _____
Renewal _____

Name _____ Birthday (Mo/Day) _____

Spouse's Name _____ Birthday (Mo/Day) _____

Wedding Anniversary (Mo/Day/Yr) _____

Street Address _____

City _____ State _____ Zip Code _____

Cell phone _____ Other phone _____

Email address _____

Date of Application _____

Please list the year(s) _____ and Model _____ of your Model A(s), if any.

Annual dues are \$20 per person, \$30 per family. Checks payable to "Natural State Model A Club"

We also encourage our members to belong to our national parent organization, Model A Restorers Club (MARC), which provides club event insurance for all our club members who are also members of MARC. If you already belong, please provide your MARC member # _____

[If you are not a MARC member, you can get an application on line and take a look at all of the benefits of membership at their website: ModelARestorersClub.org]

Please return to the club Director of Communications:

Tom Weaver
1 Reigate Ln.
Bella Vista, AR 72714

tweaver8389@gmail.com

THANK YOU