

# Golden Hills Mustang Club

## Membership Application

All Memberships are \$30 per year regardless of the number of licensed drivers in the family

PLEASE PRINT CLEARLY



Applicants Name \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Work Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
E-mail Address \_\_\_\_\_ MCA # \_\_\_\_\_

**MEMBERSHIP IS OPEN TO ALL LICENSED DRIVERS OVER THE AGE OF 16 RESIDING AT THE PRIMARY ADDRESS**

If more than one in family, please provide the following information:

Spouse's Name \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Dependents over the Age 16 Residing at above address

Name \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Name \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Name \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Name \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

The information provided on this application is used to create a membership roster for use by the Board of Directors. Other club members frequently request the information concerning address and /or telephone number(s). If you wish your address and/or telephone number (s) to be released only to the Board of Directors, Please so Indicate:

I/We Do Not wish my/our address and/or telephone number(s) to be released to anyone but the Board of Directors.  
 I/We give permission for the following information to be released to other club members, in addition to the Board of Directors:  
 All Information  Address Only  Telephone number(s) only  E-mail only  
 I/We would like to receive our newsletter each month by email in pdf format

Auto Info:

Year _____	Body Style _____	Color _____
Year _____	Body Style _____	Color _____
Year _____	Body Style _____	Color _____
Year _____	Body Style _____	Color _____
Year _____	Body Style _____	Color _____

The Golden Hills Mustang Club is a nonprofit organization dedicated to the preservation and restoration of the Ford Mustang Automobile (all years and models). I/We agree with the terms and conditions of Bylaws as set forth by the Golden Hills Mustang Club and agree to comply therewith. All information I/We have provided above is correct.

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

**\*This form must be signed by all members over the age of 16 for whom membership is applied.**

**Please Make Checks Payable To: Golden Hills Mustang Club  
P.O. Box 497  
Fairfield, CA 94533-0049**

Please Tell Us How You Were Referred: \_\_\_\_\_ Renewal \_\_\_\_\_ New