

## NCECC/SCCMGC Membership Application

Annual dues are \$25.00. Please complete this form and enclose your check made out to NCECC/SCCMGC. We look forward to an exciting year of events and just plain good fellowship.

New

Renewal

Change

Last Name, First Name, MI \_\_\_\_\_ Birthday: MO \_\_\_\_ DAY \_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip-Code \_\_\_\_\_

Res Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail address \_\_\_\_\_

British Cars (model & year) \_\_\_\_\_ Are you a member of the MGA or MGB Register? \_\_\_\_\_

Occupation (Now or before retirement) \_\_\_\_\_ Partner's Name \_\_\_\_\_

Partner's Birthday: MO \_\_\_\_ DAY \_\_\_\_ Email \_\_\_\_\_ Cell \_\_\_\_\_

As a member of the NCECC/SCCMGC, I agree to hold the NCECC/SCCMGC, its Board of Directors, officers and organizers of events free from all liability for any accident or injury which occurs in connection with club events.

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

*Mail Application to NCECC/SCCMGC, P. O. Box 10728, Brooksville, FL, 34603*