

**MASSACHUSETTS ASSOCIATION OF AUTO CLUBS
(M.A.A.C.)
MEMBERSHIP APPLICATION**

Car Club _____
Delegate _____
Mailing Address _____
City _____ **State** _____ **zip** _____
Phone () _____ **Email** _____
Fax / Cell _____

- **WHAT CAN YOU (YOUR CLUB) CONTRIBUTE THIS YEAR TO OUR ORGANIZATION?**

- **Number of members in club** _____

- **Club website :** _____

- **Club email address :** _____

- **Club alternate (if you cannot attend a meeting) :**

- **Type of club:**

Hot rod _____
Street Rod _____
Antique/Traditional/Classic _____
Import _____
Low rider _____
Other _____ (please explain)

- **Other Organization Affiliations :**

PLEASE RETURN WITH CHECK / M.O. for \$20.00

TO: MAAC Dues for Year _____
Wm. Bergstrom, Treas
6 Old Church Street
Yarmouthport, MA 02675

Please Check One:

- New membership
- Renewal

Signature _____ **Date** _____