



ROANOKE VALLEY REGION MEMBERSHIP APPLICATION

PLEASE PRINT

DATE _____

NAME _____

NAME (JOINT MEMBER) _____

ADDRESS _____

TELEPHONE _____ E-MAIL _____

OCCUPATION _____

YEAR AND MAKE OF ANTIQUE AUTOMOBILE(S):
(It is not necessary to own an antique automobile in order to be a member.)

ARE YOU A MEMBER IN GOOD STANDING OF THE NATIONAL AACA? (IF NO, NATIONAL AACA APPLICATION MUST ACCOMPANY THIS APPLICATION.)

YES - CARD # _____ NO

ANNUAL DUES (Local club only)

- SINGLE / JOINT MEMBERSHIP - \$10
(Both JOINT members must belong to National AACA)
 STUDENT (Ages 16-25) - FREE
 JUNIOR (Up through age 15) - FREE
CHECK(S) FOR DUES MUST ACCOMPANY THIS APPLICATION

RECOMMENDING MEMBERS 1. _____

2. _____

DATE ACCEPTED FOR MEMBERSHIP _____

PLEASE MAIL THIS APPLICATION (AND NATIONAL APPLICATION, IF APPLICABLE) TO:
BOB PEDIGO, 2609 PARKVIEW DRIVE, VINTON, VA. 24179



ANTIQUE AUTOMOBILE CLUB
of AMERICA