Application for New Membership

Bay City Cruisers
PO Box 376
South Beach, OR 97366

Last Name_____

First _____Spouse _____

DOB (DD/MM Only) _____
Anniversary (DD/MM/YEAR) _____

Street Address:_____
Mailing Address:_____
City: _____ State: _____ Zip: _____

E-Mail: _____
_____

Best Phone # to reach you: _____
_____

Classic Vehicles Owned: _____
_____
_____

Bay City Cruisers is a Non-Profit Car Club which meets the 2nd Tuesday of each month at 6:00 PM @ Newport Steak & Seafood, 1019 SW Coast Hwy, Newport.
Annual Dues are $25.00.
I agree to abide by Club by-laws, rules and regulations. My car(s) will be covered by my personal liability Insurance when driven on Club functions.

Member Signature_____ Date_____

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Dues Paid:_____ Cash / Check # _____ Date Paid:_____ Int.:_____