Web Form

APPLICATION FOR MEMBERSHIP
RIVER CITY CRUISERS, INC., CAR CLUB

Hermann, Missouri www.rivercitycruisers.com

Car Cruise-in 2nd Saturday in September, Monthly Cruise Casey's 2nd Friday April through October

Name: _____ Birth Date: _____
please print all information

Name : (spouse/partner) _____

Name(s) of immediate family: _____
(to be considered as members)

Street Address: _____

City, State, Zip: _____

Mailing Address: _____
(if different than Street)

Home phone number: ( ) _____ Email address: _____
a/c

Cell phone number: ( ) _____ Spouse/partner's cell phone number: ( ) _____
a/c a/c

Signature of applicant: _____

Type of car(s) (if any)

(owning a classic or special interest vehicle is not necessary for membership)

Year _____ Make _____ Model _____ Color _____

Year _____ Make _____ Model _____ Color _____

Year _____ Make _____ Model _____ Color _____

Year _____ Make _____ Model _____ Color _____

Year _____ Make _____ Model _____ Color _____

Year _____ Make _____ Model _____ Color _____

Comments: _____

_____

Fill out and mail to:

River City Cruisers, Inc.
c/o Lynn Mead, Treasurer
12311 Highway 100
Berger, MO 63014

(dues of $20/family should be included)