

**PO Box 358  
Dunmore, PA  
18512**



**A 501c(3) Non-  
Profit Charitable  
Organization  
FEIN 27-2759565**

## MEMBERSHIP APPLICATION

Checks Payable to: Villa Capri Cruisers CCI, a 501c(3) Corp.  
PO Box 358  
Dunmore, PA 18512

- Membership: \$50.00
- Application will be voted on by the club board of directors
- If submitting by paper, please send check with printed form.
- Digital - Please save the form, then click EMAIL FORM. To submit your application fee, click DONATE button on our website [www.villacapricruisers.org](http://www.villacapricruisers.org)
- **Please fill out this form completely as applicable**

I can help with (check all that apply)

Membership/Dues  
Health/Welfare  
Correspondence  
Publicity  
Trailer  
Calendar  
Shirts  
Shows/Cruises

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_ First Name of Spouse \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Land Line Phone: (\_\_\_\_) \_\_\_\_\_ Cellular: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_ Website (if applicable): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Employer Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ Work Fax: (\_\_\_\_) \_\_\_\_\_

Cars: \_\_\_\_\_

Member Sponsor 1: \_\_\_\_\_ Member Sponsor 2: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ (Not necessary if submitting online)

Notes:

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