## MTFCI

P.O. Box 355 Hudson, NC 28638-0355 828-728-5758



Visit us online at www.modelt.org

	MEMBERSHIP APPLICATI	ON
Last name:	First name:	
Spouse name:		
Address:		
City:	State:	Zip:
Province (if other than U.S.):		
Country (if other than U.S.):		
E-mail:		
Occupation:		
Home phone:	Mobile phone (op	tional):
. MTFCI membership number (for renewals):	·	
•		
List up to four Model T's that you own:		
	Car 3:	
Car 2:		
Membership roster: Membership information is normally include You may request that your information not b Include my information in the club roster: ye	e included in the printed roster by answ	
include my information in the club roster. ye	5 110	
ONE YEAR, INDIVIDUAL/FAMILY:		
<ul> <li>U.S.: \$50</li> <li>Canada: \$55</li> <li>All other countries: \$60</li> </ul> Memberships are 12-month rolling All memberships payable in U.S. funds on	a U.S. bank only	Don't miss your opportunity to receive a FREE year
To pay by check: Make check payable to MT	•	of membership! Simply give a MTFCI membership

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To pay by credit card: Complete the information below, visit www.modelt.org and pay by Authorize.net, or call 828-728-5758.

Please charge my card for this amount:				
Card type: MasterCard	d	Discover:		
Card number:				
Expiration date:	CVV: _			
Signature:				

to someone by submitting an application and payment for them or have them reference your membership number below when they submit their own application and payment. You must give or sponsor two (2) new memberships in order to receive your free year.

Offer expires December 31, 2024 Sponsoring member #: \_