

Antique Automobile Club of America South Florida Region
Membership Application
www.aaca.org/southflorida

PLEASE PRINT CLEARLY

Name: _____ **Spouse/SO:** _____
Address: _____
City / State: _____ **ZIP:** _____
Home Phone: _____ **Work Phone:** _____
Cell Phone: _____ **National #:** _____ * **Web Privacy:**
E-Mail: _____ **Sponsored By:** _____
E-Mail 2: _____ **Occupation:** _____
Web Site: _____ **Member Birthmonth** _____
Spouse Birthmonth _____
 Annual Member: \$36 per year.
 Life Member: \$360 one-time payment.
 Student Member: \$12 per year, ages 13-25 with current student I.D.

Car 1: _____
Year Make / Model / Body Style (i.e. sedan, convertible, station wagon, etc.)
Car 2: _____
Year Make / Model / Body Style (i.e. sedan, convertible, station wagon, etc.)
Car 3: _____
Year Make / Model / Body Style (i.e. sedan, convertible, station wagon, etc.)
Car 4: _____
Year Make / Model / Body Style (i.e. sedan, convertible, station wagon, etc.)
Car 5: _____
Year Make / Model / Body Style (i.e. sedan, convertible, station wagon, etc.)
Car 6: _____
Year Make / Model / Body Style (i.e. sedan, convertible, station wagon, etc.)
Car 7: _____
Year Make / Model / Body Style (i.e. sedan, convertible, station wagon, etc.)

Membership is from January 1 to December 31. Dues paid after Oct. 1 are good for the following year.

Make your check payable to **AACA South Florida**

Mail to: **AACA South Florida Membership**

Philip Williams

16600 SW 77th Avenue

Palmetto Bay, FL 33157

*You must be a member of the **National AACA** to be a member of AACA South Florida.

The application is available at www.aaca.org. **DO NOT SEND** the National application to the local office.