

# CAL CLUB ASSOCIATE MEMBERSHIP APPLICATION



To apply for associate membership with the California Sports Car Club Region of the SCCA please complete the form below (in full) and return with the appropriate payment. There is no charge for those that hold "worker license(s)" and work Cal Club events.

Name: \_\_\_\_\_

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

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

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

SCCA Member Number \_\_\_\_\_ Region name/# \_\_\_\_\_

If applying for family associate membership (Family Member(s) must be a SCCA members)

Name: \_\_\_\_\_ SCCA member number \_\_\_\_\_

Name: \_\_\_\_\_ SCCA member number \_\_\_\_\_

Name: \_\_\_\_\_ SCCA member number \_\_\_\_\_

SoPac Div. Member/Family... \$10.00

Other Region Member/Family... \$20.00

Licensed worker, list licenses \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Mail to: Allan Coy 10487 Lakeshore Drive, Apple Valley, CA 92308**

**E-Mail to: Avcoystoo@verizon.net**