

CAL CLUB ASSOCIATE MEMBERSHIP APPLICATION

CAL CLUB



California Sports Car Club
Region of the Sports Car Club of America

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@gmail.com