



WEST KOOTENAY SMOKE 'N STEEL CAR CLUB

MEMBERSHIP APPLICATION FORM

WWW.SMOKENSTEELCARCLUB.COM

Name: _____

Address: _____

City: _____ Postal Code: _____

Phone: _____ Email: _____

Spouse's Name: _____

Emergency Contact: _____

WHAT ARE YOU INTERESTED IN PARTICIPATING AND GOING TO:

CAR SHOWS	MONTHLY MEETINGS	CAR CRUISES	ANNUAL BBQ	GET TOGETHERS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

WOULD YOU BE INTERESTED IN HELPING WITH ORGANIZING:

CAR SHOWS	CAR CRUISES	ANNUAL BBQ	GET TOGETHERS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ABOUT YOUR CARS: (if none the love of cars is enough)

Make _____ Model _____ Year _____ Colour _____

Make _____ Model _____ Year _____ Colour _____

Make _____ Model _____ Year _____ Colour _____

Make _____ Model _____ Year _____ Colour _____

Signature: _____ Date: _____

OFFICE ONLY: DUES PAID	2016	2017	2018	2019	2020
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