

# Fords Unlimited Member Application

Name \_\_\_\_\_ Date \_\_\_\_\_

Second member Name \_\_\_\_\_

Address \_\_\_\_\_ Sponsor (for new members) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Spouse's name (non-member) \_\_\_\_\_

Vehicle Year \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_

Email address (**please print carefully**) \_\_\_\_\_

Second member's email address (if different) \_\_\_\_\_

Check appropriate box. New Member  Renewal  Amount paid \_\_\_\_\_

Dues are \$25. Second member in the same household is \$10

New members joining September through December are joining for the following year and will be on the roster for the remainder of the current year.

**Please mail form and check to: Fords Unlimited, P.O. Box 240201, Ballwin, MO 63024**