



# SAAC Group Maryland

## ***MEMBERSHIP APPLICATION***

PLEASE PRINT NEATLY!

TODAY'S DATE: \_\_\_\_\_ MEMBERSHIP EXPIRES: 6/30/2016

NAME: \_\_\_\_\_

SPOUSE NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE NUMBERS:

HOME: \_\_\_\_\_

WORK: \_\_\_\_\_

CELL: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

➤ I WOULD LIKE TO RECEIVE MY NEWSLETTER VIA: (CHECK ONE)  EMAIL OR  US MAIL

OCCUPATION: \_\_\_\_\_

YEAR & MODEL OF CAR(S): \_\_\_\_\_

*NOTE: OWNERSHIP OF A SHELBY IS NOT NECESSARY FOR MEMBERSHIP*

**MEMBERSHIP DUES: \$ 25.00 PER YEAR**

*MAKE CHECK PAYABLE TO SAAC GROUP OF MARYLAND & RETURN TO:*

JAN SOCHUREK  
C/O SAAC GROUP OF MD - MEMBERSHIP  
2918 CENTER DRIVE  
ELLCOTT CITY, MD 21042

TREASURER INFORMATION:

DATE RECEIVED: \_\_\_\_\_ CHECK # \_\_\_\_\_ \$ \_\_\_\_\_