Application for Membership

Name _____

Spouse/Significant Other _____

Address _____

City _____ **State** _____ **Zip** _____

Telephone # _____ **Cell #** _____

Email _____

Please list your special interest car(s):

Year	Make & Model	Body Style	Cyl	Condition

Sponsored by Visalia Vapor Trailers Member _____

Club Dues: $40.00 per year ***(payable January 1st or upon joining)***

Mailing Address:

Visalia Vapor Trailers, Inc
2133 N. Lindsay Ct.
Visalia, CA 93291

For Club Use Only:
Paid $ _____ check/cash
Date Paid _____