



**CALIFORNIA CHAPTER OF THE FAMILY MOTOR COACH
ASSOCIATION (CCFMCA) INC.**

NEW MEMBERSHIP APPLICATION

Applicant must be a member of the Family Motor Coach Association (FMCA), or must have applied for or be applying for membership in FMCA simultaneously with this application to be eligible for membership in CCFMCA. Please provide your FMCA number here: F _____.

As members, we / I agree to abide by the provisions of the Family Motor Coach Association Inc, "Code of Ethics" to foster a wholesome public image for all family motor coach owners.

Last Name*: _____ First Name*: _____ and _____

Address*: _____

City*: _____ State*: _____ Zip Code*: _____ + _____

Phone*: _____ Cell Phone*: _____

e-Mail Address*: _____

Motorhome Brand: _____ Length: _____ Slide-Out(s): Yes ___ / NO ___ Number: Left ___ Right ___

- Our fiscal year is January 1st through December 31st. Annual dues are \$15.00 (due January 1st each year).
- An initiation fee of \$25.00 is charged for two (2) people or \$15.00 for one (1) person joining CCFMCA. This covers the cost of badges, postage and materials. Annual dues are \$15.00. Those joining between October 1st and December 31st will have their dues applied to the remainder of the year and the following year.
- Additional Badges are \$10.00 each (names): _____

DATE: _____ SIGNATURE: _____

- Would you like to list your e-mail address on the roster? YES ___ NO ____ . **Note:** The e-mail roster is available only to chapter members.
- Would you like the Spot-Lite (newsletter) sent to you by e-mail? YES ___ NO ____ . **Note:** If you choose to receive the Spot-Lite by e-Mail, you will: Receive it sooner than USPS, in color, save CCFMCA cost of printing and postage cost. Please visit the CCFMCA website: www.ccfmca.org.

Please make check payable to **CCFMCA** and return both the *New Membership Application* and your payment to:

Carol A. Jones (CCFMCA Membership)
958 Dahlia Ave
Costa Mesa, CA 92626

	2 PEOPLE	or	1 PERSON
INITIATION FEE:	\$ 25.00		\$ 15.00
ANNUAL DUES:	\$ 15.00		\$ 10.00
EXTRA BADGES:	\$ _____		\$ _____
TOTAL ENCLOSED:	\$ _____		\$ _____

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MEMBERSHIP RENEWAL

The Membership Renewal is ONLY \$15.00 per coach. Please update your information in the New Membership area where **Red Asterisks** indicate. Please make check payable to **CCFMCA** and return both the *Membership Renewal* and payment to:

Carol A. Jones (CCFMCA Membership)
958 Dahlia Ave
Costa Mesa, CA 92626

RENEWAL FEE: \$ 15.00 / Per Coach
TOTAL ENCLOSED: \$ _____