



Hot Springs Cruisers Car Club Membership Application Form

Date: _____

Member Information

Name(s): _____

Please include last name, and all first names of participating family members.

Physical address: _____

Email address: _____

Phone: _____

Do you have Facebook Account(yes/no): _____

Other motor clubs you belong to: _____

Collector Vehicles(s):

	Year	Make	Model
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____

Please make check payable to "Hot Springs Cruisers" for \$20 and mail along with this completed form to Lynn McKinnon (club treasurer) at 115 Quilters Lane., Hot Springs, AR 71909.

The information is collected for internal club use only and will not be shared without your permission.