



Membership Application

1) Your Name:

Last _____ First _____ Middle Initial _____

2) Joint Membership? Yes (Enter name of the Joint Member below)

Last _____ First _____ Middle Initial _____

3) Contact Information:

Address:

Number/Street _____

City _____ State _____ ZIP Code _____

Home Phone: _____ Cell Phone: _____

Email: _____

4) Your Antique Automobile Club of America (AACA) Membership Number: _____

Membership in National AACA is required, **prior** to processing your Chesapeake Region, AACA membership application. It is **your responsibility** to establish and maintain your national AACA membership.

National AACA application forms are available on our website: <https://chesapeake.aaca.com>

FIRST YEAR NEW Chesapeake Region MEMBERSHIPS are FREE

Mail this completed Membership Application form to:

Vicky Wilmer
52 N. Houcksville Road
Hampstead, Maryland 21074

5) If you own antique vehicles, please list below current information about up to six (6) of them:

<u>Year</u>	<u>Make</u>	<u>Model</u>	<u>Condition/Status Code</u> *
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

* **Condition/Status Codes:**

NPW = National Prize Winner; **R** = Restored; **BR** = Being Restored;
OG = Original Good; **OF** = Original Fair; **MOD** = Modified; **P** = Parts Car

6) How did you hear about Chesapeake Region? _____

7) Signature: _____ **Date:** _____