

POTTSTOWN REGION AACA CLUB, INC.

2024 APPLICATION FORM

# AACA number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| Member Name (please print) |  | Joint Name (please print) |   |
| Birthday (mm/dd) |  | Birthday (mm/dd) |  |
| Address |   | Telephone |  |
| City, State, Zip |  | Email address |  |

## **Car Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Make | Year | Body Type |  Condition |
|   |   |  |   |
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|   |   |  |   |

## **Membership**

**National AACA Membership is required before acceptance as a Pottstown Region AACA member. Please have AACA # available for new membership.**

**Membership cost - Currently, Pottstown Region AACA membership is free for 2024.**

**Mail completed form to: Patricia Strunk, Membership Chairperson, 720 E 8th St. Boyertown, PA 19512.**

**You can also email completed form to:** **P1125B@GMAIL.com**

**MEMBERSHIP PRIVILEGES-https//pottstown.aaca.com**

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