

Georgia Regional Mustang Club
Membership Application

DATE: _____

New Member ~ Renewal ~ Update (please check one)

Name: _____ MCA# _____

Spouse: _____ Email: _____

Street Address: _____

City, State, Zip: _____

Telephone: (home, work and/or cell) _____

Note: It is not a requirement but GRMC encourages you to become a member of the MCA. You can obtain MCA information at www.mustang.org.

Tell us about the "Pony(s)" in your corral!

Year: _____ Model: _____ Body Style: _____ Color: _____

Engine: _____ Other: _____

(check all that apply)

Daily driver Weekend driver Stock Modified Restored Un-restored

Other (race car, etc.) _____

Year: _____ Model: _____ Body Style: _____ Color: _____

Engine: _____ Other: _____

(check all that apply)

Daily driver Weekend driver Stock Modified Restored Un-restored

Other (race car, etc.) _____

(please check one)

Do you want to provide your name, email, and/or phone number to **other members only**? Yes No

Do you want to participate in Parades, Commercials, etc. with your car(s)? Yes No

Do you wish to have your club items mailed rather than received at a meeting? Yes No

Please mail this application to:
Georgia Regional Mustang Club
P.O. Box 1803
Kennesaw, GA 30156

Please select all that apply:
 Annual Dues for Individual: \$30
 Annual Sponsorship (Business): \$150
 Shipping fee for membership package: \$5

T-shirt size (included in the new member welcome package):

SM ~ MD ~ LG ~ XL ~ 2X ~ 3X

(please check one)

*****FOR OFFICE USE ONLY*****

Method of payment: _____
Decal: _____

Membership card: _____
T-Shirt: _____