



VOTING MEMBERSHIP FORM

Year: _____

Last Name:	First:	
Address:	Phone:	
City:	State:	Zip:
Email:		
Car Information:		
Category/Class:	Car #	
Make:	Year\ Model:	
Color:	C.I. / Liters:	
Other clubs you belong to:		
Would you like to sponsor a cone?		
Small (\$3.00 each) # _____ @ \$3.00 = _____		
Large (\$10.00 each) # _____ @ \$10.00 = _____		
Annual Dues (Jan. - Dec) @ \$20.00 = _____		
TOTAL PAID \$ _____		

SEND CHECK PAYABLE TO:

ACCO
67580 W. Hwy. 20
Bend, OR 97701