



2009 Dues

PLEASE PRINT

Name: _____

Spouse/Domestic Partner: _____

Address: _____

City: _____ Zip: _____

Phone(s): Home: _____ Cell: _____

Email: _____

Vehicles: _____

Valid Drivers License: _____

Valid Insurance: _____

Dues: \$25.00 Cash Check # _____ Date: _____

Rakers' Officer Signature: _____

Mail OR bring to next meeting

Rakers Car Club

P O Box 166

Port Townsend, WA 98368