

ANTIQUE AUTOMOBILE CLUB OF AMERICA Santa Barbara Region



MEMBERSHIP APPLICATION

Name	В	irthday*
Spouse	Birthday*	Anniversary*
Address		
City	State	Zip Code
Home Phone	Cell Phone	
	National # to Linda Rosso* Email: I	
_	nd/or anniversary is optional.	
standing of the Santa Barba		aaca.org) <u>and remain a member in good</u> er of the Santa Barbara Region, a completed Treasurer AND the Applicant must be recorded

Year	Make	Model	Body Style	
Please provide the year	ar, make, model, and body style of AACA	eligible (25-year-old and older) collector (rehicles you own as you would like to	
have them appear in the club roster. Owning an Antique Automobile is not a membership requirement!				

SEND completed membership form with check payable to 'Santa Barbara Region AACA' and your National membership receipt (email) to:

on the official membership roster of the Santa Barbara Region.

Santa Barbara Region-AACA Attn: Nollie Lei Dawson, Treasurer 424 Mountain Drive Santa Barbara, CA 93103