**Membership Application  
Lake Erie Region   
Antique Automobile Club of America**

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| --- | --- | --- | --- | --- | --- |
| **Name** |  | | | | |
| **Spouse’s Name** |  | | | | |
| **Address** |  | | | | |
| **City / State / Zip** |  | | | | |
| **Phone Number** |  | | | | |
| **Nat'l AACA Number** |  | | | | |
| **Occupation** |  | | | | |
| **Optional Information** | | | | | |
| **Birthday (mm/dd)** |  | | | | |
| **Spouse Birthday (mm/dd)** |  | | | | |
| **Anniversary (mm/dd/year)** |  | | | | |
| **Name of Sponsoring Member** |  | | | | |
| **List Any Antique Vehicles you Own Below** | | | | | |
| **Manufacturer** | | **Year** | **Model** | **Cyl** | **Style** |
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**Complete this form and mail it to:**Lon Wilson  
LER AACA Membership Chair  
235 Villa Avenue  
Buffalo, NY 14216

Include check or money order for $25 payable to LAKE ERIE REGION, AACA.