

Membership Year \_\_\_\_\_  
Paid \_\_\_\_\_  
Date \_\_\_\_\_



# Membership Application

Membership is \$20 /year Due January 1st

Membership: New \_\_\_ Renewal \_\_\_ Membership # \_\_\_\_\_

NOTE: Our sources of communication are email, Facebook, and the MVMC website: <http://miamivalleymiataclub.org>

**Member 1** \_\_\_\_\_ Birthdate (mm/dd) \_\_\_\_\_  
Email Address \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Member 2** \_\_\_\_\_ Birthdate (mm/dd) \_\_\_\_\_  
Email Address \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Car #1 (Year, Color, Options) \_\_\_\_\_  
Car #2 (Year, Color, Options) \_\_\_\_\_

If new, have you been a member before? \_\_\_\_\_ If so, when? \_\_\_\_\_  
If new, how did you hear about MVMC? \_\_\_\_\_

Yes \_\_\_ No \_\_\_ I wish to enjoy the benefits of having my name, address, phone number and email address listed in the club directory on the web site, thereby allowing other club members (**only**) to contact me regarding club matters and events.

Make check payable to: Miami Valley MX-5 Club

Send form and payment to: Gina Seay, Membership Director  
61 West Hunter Drive  
Enon, OH 45323