



SOUTHERN ILLINOIS MUSTANG ASSOCIATION
MEMBERSHIP APPLICATION



NAME: DATE OF BIRTH:

PARTNER NAME: DATE OF BIRTH:

WEDDING ANNIVERSARY DATE:

ADDRESS:

CITY: STATE: ZIP:

PHONE: E-MAIL:

MUSTANG CLUB OF AMERICA MEMBERSHIP #:

LIST YOUR MUSTANGS\FORDS WITH A BRIEF DESCRIPTION:

LIST CLUB ACTIVITIES YOU WOULD LIKE TO PARTICIPATE IN:

Send this completed application along with \$20.00 to:

Judy Schwallenstecker
2900 Huett Road
Bunker Hill, IL 62014

CLUB MEETINGS ARE THE SECOND TUESDAY OF EVERY MONTH