



## Membership Application

Please fill out the coupon below:

**Your Name**

---

**Name of Spouse, if applicable**

---

**Address**

---

**City/ State/ Zip**

---

**Phone Listing/Cell**

---

**E-mail**

---

**Month & Date of Birth/s**

---

**Make/Model of Car/Truck, if any**

---

**Other Club Affiliation, if any**

---

**Dues are \$10.00 with Application** and are renewed annually each year in April.  
Make check payable to the **Klassy Kruisers Car Club** and send your application with remittance to:

**Klassy Kruisers Car Club**  
**PO Box 2414**  
**Ames, IA 50010-2414**

**For more information: Contact Tony Caponigro, Pres.**  
**(515) 964-2653 or E-mail: [anthonyjcap@msn.com](mailto:anthonyjcap@msn.com)**  
**or Susan Harris at (515) 292-9076**

*Thank you for your interest in advance!*