



2010 Membership Form

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number(s): _____

Email Address (important): _____

**Tell us about your car(s)
Use reverse side for any additional vehicles or unique vehicle information**

	1 st Vehicle	2 nd Vehicle	3 rd Vehicle	4 th Vehicle
Year:				
Make:				
Model:				
Body Style:				
Engine:				
Trans:				
Color:				

**Please make your \$30.00 check or money order payable to Michigan Mopar Muscle,
Then send your payment with this completed form to:**

**Michigan Mopar Muscle
c/o John Yanok VP -Secretary
5174 Canyon Oaks, Brighton MI 48114**

Remember to visit www.michiganmoparmuscle.com for the latest news and info.