



Northern Colorado Mustang Car Club (NCMCC)

Membership Application

"Can your Mustang come out and play?"

<input type="checkbox"/> New Member-Fill in completely <input type="checkbox"/> Renewing Member – Fill in changes only		Membership Coordinator Contact info: Email: membership@ncmcc.org Address: Jeff Pagani, 4201 Goldeneye Dr, Fort Collins, CO 80526	
Please bring application and payment to club meeting or mail to membership coordinator			
Name(s): First Last		Emergency Contact(s): Name Phone Relationship	
Address: Street	City	State	Zip
Email	Home Phone	Cell Phone	
Mustang(s) Information: Year	Color	Model	Engine
Birthday: Month/Day Only (If multiple members, please ID by name)		How did you hear about NCMCC?	
All members are automatically included in the annual Membership directory. This directory is for internal club use only, and not distributed externally. Please check if you DO NOT want to be included in the directory.			
<input type="checkbox"/> I do not wish to be included in the club directory.			
Membership Type and Dues <input type="checkbox"/> Individual \$20 <input type="checkbox"/> Couple \$30 <input type="checkbox"/> Lifetime \$250 (Individual Members Only) Dues are due yearly for NCMCC membership to remain active Cash or Check accepted at time of membership. Make checks payable to NCMCC			
Statement of Liability			
1. I understand that Northern Colorado Mustang Car Club (NCMCC) cannot assume responsibility for any aspect of my safety while participating in club activities. 2. I understand and acknowledge that I voluntarily participate in NCMCC activities and I accept responsibility for my own actions. 3. I release NCMCC, its directors and all of its members from all responsibility for injury or loss to myself or my personal property. 4. I certify that I am in compliance with Colorado's laws regarding automobile insurance and vehicle insurance. I will provide proof of coverage if asked by any club officer, event coordinator or 3 rd party activity coordinator.			
Signature(s)			
<ul style="list-style-type: none"> • By signing below, you are agreeing to the above liability claim. • Couple Membership: Signature required for each adult. • If under 18 years of age, signature must be accompanied by the signature of your legal guardian. 			
_____ Printed Name			_____ Signature
_____ Printed Name			_____ Date
_____ Printed Name			_____ Signature
_____ Printed Name			_____ Date