



**MEMBERSHIP APPLICATION FORM**

**DATE:** \_\_\_\_\_

**Applicant must be a member of the FAMILY MOTOR COACH ASSOCIATION, INC., must have applied for or be applying for membership simultaneously with the FMCA to be eligible for membership with the OLYMPIC SNOWBIRDS CHAPTER OF FMCA.**

**NAME:** \_\_\_\_\_ **F#** \_\_\_\_\_  
*Last Husband Wife*

**ADDRESS:** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**PHONE:** Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_ Winter \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**EMERGENCY: NAME & TEL.NO:** \_\_\_\_\_

**BIRTHDAY:** Husband \_\_\_\_\_ Wife \_\_\_\_\_ **ANNIVERSARY DATE:** \_\_\_\_\_

**COACH:** Make/Model \_\_\_\_\_ Length: \_\_\_\_\_ Slide out: YES \_\_\_ NO \_\_\_

**Yearly Dues: \$ 20.00      Name Badges: \$11.00 Each**  
*( Includes badges, postage and membership )*

**TOTAL \$** \_\_\_\_\_

**Make checks payable to:**

**Treasurer, Olympic Snowbirds**

**and mail to:**

**Brian Illston**  
**22617 NE 192 Court,**  
**Woodinville, WA      98077**

**Notes:**