

Office Use: Member# _____ Spouse# _____ Youth #1 _____ Youth #2 _____ Youth #3 _____

MEMBER APPLICATION BEAVER CHAPTER MAFCA

Month _____ Year _____

PLEASE COMPLETE ALL INFORMATION

NAME _____ SPOUSE NAME _____
Last First

STREET _____ CITY _____ ST _____ ZIP _____

HOME PHONE _____ CELL PHONES **M** _____ **S** _____

E-MAIL: **M** _____ BIRTHDAY: Month _____ Day _____

S _____ BIRTHDAY: Month _____ Day _____

CAR YEAR (optional) _____ BODY STYLE _____

Honorary Member Since (_____) \$ PAID

Beaver Chapter Dues (\$25.00) \$ _____

Additional Dues if paid after Dec 31st (\$5.00) \$ _____
(for renewing members only)

Spouse Dues (\$1.00) \$ _____

Youth Dues (\$1.00 each) (Must be between 15 and.....\$ _____

20 years of age) Names: 1. _____

2. _____ 3. _____

*****AHOOGA Newsletter mailed copies only (\$25.00) \$ _____**

Total Due \$ _____

(monthly electronic versions are no additional charge)

NOTE: Dues paid by a new applicant on or after July 1st shall constitute payment of the full dues for the following year.

ALL MEMBERS ARE REQUIRED TO BECOME & MAINTAIN MAFCA MEMBERSHIP. PLEASE CONTACT MAFCA: 250 SOUTH CYPRESS, LA HABRA, CA 973315515 PHONE: 562-697-2712

NOTE: If joining after September 1st, membership and all club benefits to MAFCA will continue through the following year.

MEMBERS: HAVE YOU PAID YOUR MAFCA DUES: YES _____ NO _____ MAFCA NO. _____

PLEASE MAKE CHECKS PAYABLE TO: BEAVER CHAPTER MAFCA

**Mail to: Chris Irwin, Membership Coordinator
507 N College St
Newberg, OR 97132**

