

# The HASSIE Club Membership Application

Please print very clearly for accuracy!

Info will be used for club business, printed in Roster, and maybe newsletter

Today's Date (Mo/Day/Yr): \_\_\_\_\_ New \_\_\_\_\_ or Renewal \_\_\_\_\_

Name: \_\_\_\_\_ Spouse: \_\_\_\_\_

Birthday Month/Day: \_\_\_\_/\_\_\_\_ Spouse's Birthday Month/Day: \_\_\_\_/\_\_\_\_ Anniversary: (Mo/Day): \_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Main Email: \_\_\_\_\_ Spouse Phone: \_\_\_\_\_

Alternate Email : \_\_\_\_\_ Please send my newsletter by:  postal mail  E-mail

Occupation: \_\_\_\_\_

Children: (Names, Ages & Birthdays- info may be printed in Hassie Roster and/or newsletter)

CARS: List as to Year, Make, Body, No. Cyl. and Condition: S=Show Condition; PR=Partially Restored; PRR= Partially Restored Running; UR=Unrestored; OC=Original Condition. Pictures of the car are appreciated. Add additional page(s) as needed

**required to list**

Insurance Carrier: \_\_\_\_\_

**required to list**

Policy No. \_\_\_\_\_

(Cars participating in Hassie activities MUST be covered minimally by liability insurance.)

Coverage: \_\_\_\_\_ Cars Covered: \_\_\_\_\_ Do you want your car(s) listed in the Hassie roster?

No Insurance Coverage  Will insure by summer  Yes  No

The objective and purposes for which this non-profit corporation is formed are to meet regularly and encourage the collection, preservation, restoration, ownership, operation and exhibition of automobiles described as antique, vintage, classic and special interest, to act as a source of technical and historical information pertaining to aforesaid type of automobiles, to encourage careful, prudent and skillful driving on public highways; to cooperate with other similar groups and organizations throughout the United States and in foreign countries.

Membership dues are \$22; paid by Dec.31st and \$24 after Jan.1st per year and includes membership for both husband and wife. Applications received from incoming, new members after Nov. 15th will include the following year. Members agree to abide by all the rules and regulations of the organization.

Applicants

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Please send application and payment to: **The HASSIE, P.O. Box 18814 Spokane WA, 99228**