



VEGAS VALLEY 4 WHEELERS

MEMBERSHIP FORM

Membership Date: _____

Name: _____

Co-Member: _____

CB Handle: _____

CB Handle: _____

Birth day: _____
Month/Day

Birth day: _____
Month/Day

Address: _____

City: _____ Zip: _____

Home Phone: _____

Work Phone: _____

E-mail: _____

Names of other Family Members: _____

Type of Four Wheel Vehicle: _____
Year Make Model

Special Equipment: _____

Second Four Wheel Vehicle: _____
Year Make Model

Special Equipment: _____

In Case of Emergency please notify: _____

Notes: _____

For Club Use Only

____ Vehicle Plaque

____ Dues & initiation fee

____ Year's dash plaque

\$20 initiation fee,

Dues 1/1 - 6/30 = \$36, 7/1 - 12/31 = \$18