The Autoneers Membership Application

Complete this form and mail it with the membership fee to the address indicated below. You may fill in the form on-screen then print, or print and complete the form by hand. *(Please Print Clearly)*

LAST NAME:

FIRST NAME: **SPOUSE/PARTNER:**

YOUTH (to age 16): **YEAR OF BIRTH:**

ADDRESS:

CITY: **STATE:**

ZIP CODE: **PHONE:** ☐ **MOBILE/TEXT**

EMAIL:

Autoneers Name Badges - (Enter name(s) to be printed on name badge(s))

First Name **Last Name**

Vehicle Information: Pre-1915 (note additional vehicles on back of this form)

Year	Make	Model	Body style	Body #	Engine #

Are you a member of the HCCA National? If so, please record your number.

Family Annual Dues: $25.00 **Number of years being paid:** **Dues Total:**

Prepayment of dues for multiple years is accepted and will be recorded.

Remit to:

The Autoneers
c/o Skip Carpenter
265 Boylston St
Shrewsbury, MA 01545

Questions?

Contact Skip at
scarp265@townisp.com
Phone: 508.868.6648