

MEMBERSHIP FORM

PIERCE-ARROW SOCIETY

Contact Information

Name:

Address:

City: State: Zip Code:

Country:

E-mail:

Home Phone: Office/Cell:

Pierce-Arrow Information

Please include the following information about each Pierce-Arrow you own (if any) using the backside if necessary

Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Truck <input type="checkbox"/> Bicycle <input type="checkbox"/> Motorcycle <input type="checkbox"/> Travelodge	Year: <input type="text"/>	Model: <input type="text"/>
	Serial Number: <input type="text"/>	Engine Number: <input type="text"/>
	Body Style: <input type="text"/>	Body Code: <input type="text"/>
	Previous Owner: <input type="text"/>	

Membership Plans

PAS Mailing Options	<input type="checkbox"/> \$45 per year ~ USA Standard Mailing + Digital	<input type="text"/>
	<input type="checkbox"/> \$55 per year ~ USA 1st Class Mail + Digital	<input type="text"/>
	<input type="checkbox"/> \$60 per year ~ Canada Mail + Digital	<input type="text"/>
	<input type="checkbox"/> \$80 per year ~ International Mail + Digital	<input type="text"/>
	<input type="checkbox"/> \$55 per year ~ Digital Membership Only	<input type="text"/>

Savings for International & Canadian Members

SUPPORT the PIERCE-ARROW MUSEUM at GILMORE

One-time Museum donation >>

Pierce-Arrow Museum Donations are tax-deductible under U.S. Law. Please keep a COPY of this form for your tax records

\$40 annual Pierce-Arrow Museum Membership

Check: Make Check Payable to Pierce-Arrow Society (USD only) **TOTAL**

Credit Card:

Card Number:

Expiration: CVV Code:

Name On Card:



Return this completed form and payment to:



Diana Stevens
Pierce-Arrow Membership
 Post Office Box 309
 Whitehall, MI 49461