



## MEMBERSHIP FORM

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

PHONE #: \_\_\_\_\_ CELL #: \_\_\_\_\_

EMAIL: \_\_\_\_\_ MODEL: \_\_\_\_\_

VEHICLE MAKE/YEAR: \_\_\_\_\_

## PERMISSION TO RELEASE INFORMATION

TO: The Markham Stouffville Cruisers

RE: Permission to release personal information to other club members

I, \_\_\_\_\_, authorize the Markham Stouffville Cruisers to release the personal information hereinafter specified to other Club Members.

This shall include, and be limited to my name, phone number, pictures and email address.

This authorization will remain in effect for long as I am a member in good standing, or until I revoke my permission by way of written retraction of this authorization.

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_

NAME (print): \_\_\_\_\_

MEMBERSHIP FEE:  
\$50  (new and renewals)



RETURN COMPLETED FORM TO DAN FANELLI AT: [GTAINTERIORS@ROGERS.COM](mailto:GTAINTERIORS@ROGERS.COM)