



The North Central Florida Chapter Studebaker Drivers Club, Inc. Membership Form



Name: _____ birthday (MM/DD) Spouse: _____ Birthday (MM/DD)

Address _____

City _____ State _____ Postal Code _____

Home Phone _____ Mobile: _____

E-mail _____

Other Family Members _____

Studebaker(s) you own: _____

Annual Dues \$15.00 per family. Make Checks payable to NCFC-SDC (no cash please)

Mail to:

**Carol Goodrich
4637 Floramar Terr.
New Port Richie, FL 34652**

How did you hear about us?	
<input type="checkbox"/>	Friend
<input type="checkbox"/>	Car Show/Cruise In
<input type="checkbox"/>	Studebaker Drivers Club, Inc.
<input type="checkbox"/>	Internet
<input type="checkbox"/>	Magazine
<input type="checkbox"/>	Other

All applicants must also be current members of the Studebaker Drivers Club, Inc.
Register online: studebakerdriversclub.com or contact

Studebaker Drivers Club, Inc.
PO Box 1715
Maple Grove MN 55311

Phone (763)420-7829

**More information online
www.bulletnose.org**