



CENTRAL CONNECTICUT REGION
ANTIQUE AUTOMOBILE CLUB OF AMERICA
MEMBERSHIP APPLICATION

Date _____

Name _____ Spouse _____

Street Address _____

Town _____ State _____ Zip _____ - _____

Home Phone _____ Cell Phone _____

Email _____

AACA Membership Number _____

(You must be a member of the AACA National to belong to a Region)

OR

AACA Application Attached Yes _____ No _____

Applicant's Signature _____

Year and Make of Automobile(s) Owned

Condition

(You do not need to own an antique or special interest vehicle to become a member of the AACA)

Annual Dues \$15.00

Please make check payable to:
CCR-AACA

Please mail application to:

Ray Yirga CCR-AACA Membership Chair
3 Old Field Road
Granby, CT 06035-2030
860-924-8372
yirgaray@gmail.com