



Southern California Mini Truck Council

Membership Application

Please print clearly and use ink pen

Club Name: _____ Date of Application: _____

Include month day & year

Mailing Address: _____

City: _____ State: _____ Zip: _____

Attention: _____

Email Address: _____

Club Website: _____

President: _____ Phone: _____

Vice Pres: _____ Phone: _____

Meeting Location: _____ City: _____

When are your meetings: _____

By signing, I acknowledge that the above information provided is correct and we as a club have read and understand the SCMTC by laws. I also acknowledge that I will provide the SCMTC officers with our club member roster with vehicles and by laws.

Club Pres. Signature

Club Vice Pres. Signature

Below is for Council Officers use only

Date Received: _____ Form of Payment: _____ Receipt #: _____

Check off items received: Roster of Members: _____ Club By Laws: _____ OK'd by Council Officers _____

Date Voted: _____ Outcome of Vote: Yah/Nah