



## Oakland Owners Club International, Inc.

### Membership Application

#### Personal Information

First Name:  Last Name:  Partner First Name:

Mobile #:  Home Phone #:

Street Address 1:

Street Address 2:

City:  State/Province:  Country:

Zip/Postal Code:

#### Car Facts

Year:  Model:  Body Style:  Condition:

1 = Concours, 2 = original, 3 = Partial restoration, 4 = Fully restored, 5 = Modified, 6 = Parts car

Year:  Model:  Body Style:  Condition:

Year:  Model:  Body Style:  Condition:

Year:  Model:  Body Style:  Condition:

Year:  Model:  Body Style:  Condition:

Year:  Model:  Body Style:  Condition:

Email this form to: [bugroach50@gmail.com](mailto:bugroach50@gmail.com)

or mail it to:

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