



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: (renew)
please check one:

\$40 ☐ for members PRIOR to 2020

MEMBERSHIP FEE: (new)
\$50 ☐ new members, 2020, onward



Return Completed Form To: vince.s@rogers.com