

San Diego County Chapter Membership Form

Name:			
Spouse:			
Address:			
			Zip:
Phone/Cell:			_
Email:			
Birthdays (All family membe			
Anniversary Date:			
Studebaker(s) Owned: (If a	additional space is neede	ed, used back of appl	lication)
Year: Model:	· 		
Year: Model:			
DUES NOTE: You must be	a member of the Nationa	al Studebaker Drive	rs Club.
Member #			
		oter Membership	
Payment made via		<u> </u>	
			Diego Chapter Membership
Email completed members	ship form to: mag	giehalgren@gmail.co	<u>om</u>
Or Print and Mail to:	Mim	i Halgren	

c/o San Diego Chapter Membership

9350 El Tejado Road La Mesa, CA 91941