



Our club's purpose is to promote the preservation and restoration of antique automobiles, particularly the Ford Model T. Model T ownership is not required for membership. We hold our monthly meetings the first Thursday of each month (7:30 pm) at the Tigard Senior Center, 8815 O'Mara St., Tigard, Oregon 97223. Our monthly meetings update members on club business and activities, Portland Swap Meet, technical programs and Model T restoration questions are discussed. The club sponsors about 10 tours each year. There are also other events throughout the year including a Fall Banquet and annual Christmas Party.

We are one of the six car clubs that sponsor The Portland Antique Auto Swap Meet and we encourage members to volunteer and assist with the Swap Meet.

## MEMBERSHIP APPLICATION

Name \_\_\_\_\_ Birth date \_\_\_\_\_

Spouse/Significant other \_\_\_\_\_ Birth date \_\_\_\_\_ Anniversary \_\_\_\_\_

Children/dependent (living at home) \_\_\_\_\_ Birth date \_\_\_\_\_

\_\_\_\_\_ Birth date \_\_\_\_\_ Birth date \_\_\_\_\_

Address \_\_\_\_\_  
No. & Street name or P.O. Box No. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip + 4 (Please) \_\_\_\_\_

Telephone – Home \_\_\_\_\_ Work \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Are you a member of MTFCA \_\_\_\_\_ No. \_\_\_\_\_ Expires \_\_\_\_\_ MTFCI \_\_\_\_\_ No. \_\_\_\_\_ Expires \_\_\_\_\_  
(Y/N) (Y/N)

Auto Ins. Co. (Not agent) \_\_\_\_\_ Policy No. \_\_\_\_\_ Expires \_\_\_\_\_  
(Club info only)

Cars to be listed in roster: Car #1 \_\_\_\_\_ Car #2 \_\_\_\_\_  
(Model & Year) (Model & Year)

Car #3 \_\_\_\_\_ Car #4 \_\_\_\_\_  
(Model & Year) (Model & Year)

I certify that the Model T Ford used by me on tours is registered and licensed in the State of my residence and that is in safe roadworthy condition. It has a working brake light, fire extinguisher and safety plate windshield. I understand any participation on club tours will be at my own risk and that I am required to have automobile insurance. I certify that all information on this membership application is accurate and true.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Membership fee is \$10.00 per year. Please make check payable to the **R.C.M.T.C.** – Forward check and completed application form to:  
Bob & Donna Earnest  
1119 NE 107<sup>th</sup> Place  
Portland, OR 97220-3938