



SAAC Group Maryland

MEMBERSHIP APPLICATION

Today's Date: _____ Membership Year: 2024

Name: _____

Spouse Name: _____

Address: _____

City	State	Zip
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Telephone Numbers:

Home: _____

Cell: _____

Email Address: _____

Occupation: _____

Year & Model of Car(s): _____

Note: Ownership of a Shelby is not necessary for Membership

MEMBERSHIP DUES: \$25.00 per year

Payment Options:

- Mail a check payable to SAAC Group of Maryland and return the form to the address below
- Pay by PayPal to <https://paypal.me/saacgroupmd> and email the form to saacgroupmd@gmail.com
- Pay in Cash at a Club Meeting

PAM FLEAGLE
c/o SAAC Group of MD - Membership
13747 Bottom Rd
Hydes, MD 21082

Treasurer Information:

Date Received: _____ Check # _____ PayPal \$ _____