

HRRVC Western Holiday Pusher Chapter 500
Membership Application

New Member _____ Renewal _____

HRRVC National Membership # _____ FMCA Membership # _____

Last Name _____ First Name _____ Spouse _____

Street _____ City: _____ State: _____ Zip: _____

E-Mail: _____ Home Phone: _____

FAX: _____ Cell Phone: _____

Pusher Model: _____ Year: _____ Length: _____ Engine HP: _____ Engine Mfg.: _____

Would you be willing to receive your newsletters by e-mail only? (Please check one.) Yes ___ No ___

Signature: _____, Date: _____/_____/_____

Dues: \$15 Make check payable to: Western Holiday Pusher Chapter 500

Send application and check to: **Tom Struthers**, Treasurer, 189 Moll Drive, Windsor, CA. 95492

Western Holiday Pusher Chapter 500
Problem Resolution Information (OK to use a separate page or email)

Name: _____ HRRVC # _____

Address: _____

City: _____ State: _____ Zip Code: _____ Phone: _____

Model: _____ Year: _____ Chassis: _____ Engine: _____ HP: _____

Problem:

How it was resolved and what did it cost?

Send to: Tom Struthers, 189 Moll Dr., Windsor, CA 95492, or tomstru@gmail.com