

MONACO NORTHEAST EXPLORERS
Membership Application/Renewal Form

Name: _____ Date: _____

Co-pilot: _____

Street Address: _____

City: _____ State/Province: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-Mail Address: _____

{ } Please still mail copy of newsletter.

FMCA #: _____ Note: FMCA number must be included

Motorcoach Info: _____
Year Make/Model Length

Signature of Applicant: _____

Initiation Fee for new members:	\$ 1.00
Annual Dues (thru 12/31):	\$ 20.00
Three Years Dues:	\$ 50.00

Total Paid: \$ _____

Send Application and check payable to:
Monaco Northeast Explorers
Mrs. Walter Rostek, MNE Treasurer
64 Pheasants Crossing
W. Springfield, MA 01089

Visit us at our new website: WWW.MONACONORTHEASTEXPLORERS.COM