



THE FOUR WHEEL DRIVE CLUB OF FRESNO MEMBERSHIP APPLICATION

Name _____ Age _____

Address _____ City _____ State _____ Zip _____

Married (please circle one) Y N If Yes, Spouse's Name _____

Home Phone # _____ Cell Phone _____

Email Address _____

Occupation: Applicant _____ Spouse _____

Type of Vehicle _____ Engine Type _____

Special Equipment _____

Who is sponsoring your application for membership? _____

Why are you interested in joining the 4WDC of Fresno? _____

Have you read the By-laws of the 4WDC of Fresno? _____

a copy of the By-laws can be provided by the Membership Secretary upon request.

Are you willing to accept the governing of the officers in the 4WDC of Fresno? _____

If approached, would you hold an office? _____

Will you abide by the regulations set forth by the Forest Service pertaining to certain trails and back country travel? _____

Are you willing to work with the club on trail clearings and conservation projects? _____

Do you have any special talents along this line? (E.g. working a jackhammer, chainsaw, etc.) _____

Would you and your family attend the entertainment functions sponsored by the club? _____

Would you be willing to help in setting up and putting on these functions? _____

Signature _____ Date _____

The above application is subject to review by the membership secretary, and upon approval by the general membership of the Four Wheel Drive Club of Fresno. It will be kept on record in our files upon acceptance.

Events attended:

- | | |
|----------|---------------------------|
| 1. _____ | Received _____ |
| 2. _____ | Board Approval _____ |
| 3. _____ | Membership Approval _____ |
| | Club ID# issued _____ |

Please email to Membership Secretary

Club Email: fwdcfresno@gmail.com

P.O. Box 8292

Fresno CA, 93747