

Membership Application Form
Mountain Miatas of East TN
www.mountainmiatas.com

Applicant Name: _____ Date: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ County of Residence: _____

Email Address: _____ Home Phone: _____ Cell Phone: _____

Occupation: _____

Co-Applicant Name: _____ Relationship to You: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ County of Residence: _____

Email Address: _____ Home Phone: _____ Cell Phone: _____

Occupation: _____

Your Miata: Year: _____ Color: _____ Car Name: _____

Is this your first Miata? Yes No If not, how many Miatas have you owned? _____

Are you interested in helping with club activities? Yes No

Are you interested in serving on a committee? Yes No

Make checks payable to "Mountain Miatas of East TN"

With your Signature(s) you AGREE and ACCEPT the following statements and conditions:

As a member of Mountain Miatas Club of East TN, Inc., I agree to obey all Tennessee motor vehicle laws and set a positive example for other drivers. I acknowledge that any driving event, whether on a public road or on a track, involves danger and risk. I will not hold the Mountain Miatas Club, its officers, members, or assigns responsible for any accident, mishap, or injury that may occur during any Mountain Miatas Club meeting, event, or activity. I understand that the Mountain Miatas Club does not provide medical, accident, or general insurance.

Applicant Signature: _____ Date: _____

Printed Name: _____

Co-Applicant Signature: _____ Date: _____

Printed Name: _____