



## BCOIE Chapter Membership Form

\_\_\_\_\_ **New**      \_\_\_\_\_ **Renewal**

Name: \_\_\_\_\_ Spouse: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address(s): \_\_\_\_\_

Birthdays (Members): \_\_\_\_\_

Anniversary Dates: \_\_\_\_\_

Studebaker(s) Owned: (If additional space is needed, used back of application)

Year: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Model: \_\_\_\_\_

Year: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Model: \_\_\_\_\_

**DUES NOTE:**      You must be a member of the **Studebaker Drivers Club.**

**Member #** \_\_\_\_\_ (Studebaker Drivers Club application form is available on this website)

**New Members** - Referred to BCOIE by: \_\_\_\_\_

**BCOIE dues:**      **\$20 per Family Annually ~ Make Check payable: BCOIE Membership**

**Print and Mail to:**  
**Debbie Stockey**  
**c/o BCOIE Membership**  
**17410 Golden Maple Lane**  
**Yorba Linda, CA 92886-5196**

[www.StudebakerSoCal.com](http://www.StudebakerSoCal.com)