



DelMarVa Chapter P.O.C.I.

MEMBERSHIP APPLICATION

NAME (please print): _____ Birthday: Month _____ Day ____ Year (optional) _____

SPOUSE: _____ Birthday: Month _____ Day ____ Year (optional) _____

Anniversary: Month _____ Day ____ Year (optional)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

Chapter Membership is conditioned upon current membership in the Pontiac-Oakland Club International (POCI).

My POCI membership number is _____ Delmarva Chapter (renewals) # _____

SIGNATURE: _____

PONTIAC / OAKLAND / GMC VEHICLE(S) OWNED:

Make: _____ Year: _____ Model: _____ Engine: _____

Make: _____ Year: _____ Model: _____ Engine: _____

Make: _____ Year: _____ Model: _____ Engine: _____

Make: _____ Year: _____ Model: _____ Engine: _____

Annual dues are \$15 per member and are effective 4/1 - 3/31.

New memberships paid after October 1st of a particular year will be applied to the following year's dues.

Make checks payable to *DelMarVa Chapter P.O.C.I.*

Mail to : DelMarVa Chapter POCI, P.O. Box 417, Townsend, DE 19734-0417

Email: DelMarVaPOCI@gmail.com