

## **Membership Application / Renewal**

Please complete the	following information:		Date:
Name:	Member # if renewal:		
Joint Member (in same ho	usehold):		
Address:			
City:	State/Prov:	9 Digit Zip Code:	
Country:	Email Address:		
Home Phone: ( )	Alternate Phone: ( )		
Please tell us about much information as possil	your Rootes vehicle(s) Use addo	ditional pages for additional c	ars. Please supply as
Make e.g. Sunbeam:	Model e.g. Alp	pine:	Year:
Series e.g. MK1:	Body Type e.g. conv	Engine #:	· · · · · · · · · · · · · · · · · · ·
VIN # incl suffixes:		JAL/SAL # :	
Color Code: Comments on car or info o	Actual Color: on additional vehicles:	Year pur	chased:
Membership Dues (sin	gle or joint memberships):		
	Printed Newsletter via US Mail	Electronic Newsletter	via Email

Please make check or money order payable to **TEAE** (US funds) Send with this application to:

\$45 USA

**\$54** International

TEAE c/o Joe McConlogue 820 Fishing Creek Valley Rd Harrisburg, PA 17112

One Year

Questions? Contact Joe McConlogue Phone: 717-809-1008

\$35 USA and International

**CDN\$35 Electronic Canadian** 

Email: membership@teae.org