❑ New - $25
❑ Renewal - $15

Date Paid _____
Check No _____
~~CLUB USE ONLY~~

2026 Henry's Lady Membership

If new member, please print all information requested below. If renewing, print your name and new information

Name:_____ **Spouse**:_____

Address:_____ **City/Zip**:_____

Area Code/Telephone: Home _____ **Your Cell** _____ **Spouse Cell** _____

MAFCA Member #_____ For free first year membership in Model A Ford Club of America (MAFCA), see Membership Chairman. MAFCA membership is strongly encouraged for all Henry's Lady members.

Insurance Co:_____ **Your E-mail Address**:_____

Year & Body Styles of your Model A Fords: _____

_____

Your Birthday (**NO YEAR**) _____/_____

Spouse Birthday (**NO YEAR**) _____/_____

Wedding Anniversary _____/_____/_____

Make your check payable to: **HENRY'S LADY CHAPTER, MAFCA** and mail to:
HENRY'S LADY CHAPTER, P.O. BOX 1442, GRANTS PASS, OR 97528-1442

❑ New - $25
❑ Renewal - $15

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