



NORTHWEST PILOT CAR ASSOCIATION

275 E. Humptulips Rd., Hoquiam, WA 98550

Membership Application

Secretary Use Only
Date Joined ___/___/___
Dues Paid _____

Check box if this is a renewal

Personal Information

(Please add information that's changed if this is a renewal, name and signature are required)

Name: _____

Business Name: _____

Mailing Address: _____

Street Address: _____

City: _____ State: _____ Zip: _____

City you prefer to be listed under in the Pilot Car Directory: _____

Check the box if you would not like to be listed in the Directory

Email Address: _____

Home Phone: _____ Cell: _____

Birth Month and Day: ____/____ Year ____ (optional)

Pilot/Escort Information (mark an "X" by all those that apply)

- ___ Front /Lead Escort ___ Route Surveys ___ VHF Radio
- ___ Rear Escort ___ Certified Pilot/Escort ___ CB Radio
- ___ High Pole ___ Steer person ___ Commercial Auto Ins.

Certification State **WA UT NY OK Other** _____ **(Circle all that apply)**

Occupation: _____ Title: _____

Signature _____ **Date** ____/____/____