APPLICATION FOR MEMBERSHIP



Division
Buick Club of America

BUICA 1997	
olication.	

☐ NEW				
☐ RENEWAL Re	atta Division #	(Cartill)		
☐ I AM NOT A BO	A MEMBER. Please se	end a BCA membership application.		
NAME:				
ADDRESS:				
		STATE:ZIP+4:		
HOME PHONE:()		SPOUSE/SIG. OTHER:		
CELL PHONE: ()		SPOUSE/OTHER CELL:()		
REATTA YEAR:	BODY STYLE: □	Coupe Conv. with Top Color		
EXT. COLOR:	INT. COLOR:	RUB STRIP COLOR:		
My Reatta has: ☐ Sunro	of 🔲 16-way seat	□ CD □ OTHER:		
VIN #:		(Use reverse side for additional Reattas.)		
EMAIL ADDRESS:				
BCA#:(You <u>must</u> be	BCA EXPIRATION a member of the BCA	ON DATE:/ (month/year) Ito be a member of the Reatta Division)		
•	e make your check for	\$10 (US) payable to "REATTA DIVISION, BCA" and		
forward with this form to:	Jerry Richstein, Sec/Tre Reatta Division, BCA 4798 Grants Way NE Marietta, GA 30066	as. E-mail questions to: ReattaClub@gmail.com		
		You can download from www.reatta.org , save		

the form and email the completed form to ReattaClub@gmail.com

If you email the form, you can pay your dues via PayPal to ReattaClub@gmail.com

You also have the option of paying for up to 3 years dues at one time, either via PayPal or check.

If you are already a member of the Reatta Division, please give this to someone who may be interested in joining. Thank you.

Division Use Only: Reatta Division #_____ Paid through ___