MUSTANG CLUB OF CENTRAL PA

www.pamustang.org

P.O. Box 6348, Harrisburg, PA 17112

MEMBERSHIP APPLICATION

Thank you for your interest in the Mustang Club of Central PA. Below is the membership application for our club. Please complete and mail the form to: Mustang Club of Central PA, P.O. Box 6348, Harrisburg, PA 17112. Please make checks payable to Mustang Club of Central PA.

With your membership in the club you receive:

Free MCCPA gift*
Free MCCPA window sticker
Club membership listing
Email notifications of events and activities
Access to MCCPA's website

2027 Family Membership - $35.00 / year

*(*Discounted to $30.00 / year if you join before 12/31/2026)*

Date_____

Name_____

Street_____

City, State, Zip_____

Telephone Number_____

E-mail Address_____

Car Information:

Year_____ Model_____Color_____ Special features_____

Year_____ Model_____Color_____ Special features_____

We are a Mustang Club of America Regional Group. MCA provides benefits to our club, including insurance for our events. We need to keep accurate records of which members belong to the MCA. This information will not be distributed and will only be shared with the MCA when they request it for our insurance applications.

Do you belong to the Mustang Club of America? Yes_____ MCA Membership Number_____

How did you hear about us? ___Saw us at an event ___Word of Mouth ___Facebook ___Internet

Other:_____