Membership Application					
Memberships are for 1 year and include 12 issues of <i>Turning</i>					
Wheels®. You can now join/renew for up to 5 years.		•	_		
Manufacatio in UO	1	3	5		
Membership in US	year	years	31 <del>5</del> 2 - 33		
Regular Members w/periodicals:	000	Total	Total		
New Members 1st year only	.\$29	na	na		
Regular Member renewal w/periodical class mail	\$36	\$99	\$161		
Regular Member renewal w/1st class mail	\$62	\$183	\$300		
Student & Young Adult Membership (To 22 yrs old)		\$87	\$145		
SDC Membership WITHOUT Turning Wheels	\$12	\$36	\$60		
☐ Turning Wheels subscription WITHOUT SDC	<b>#</b>	<b>007</b>	<b>0445</b>		
membership (Libraries, etc.)	\$29	\$87	\$145		
Memberhip in Canada					
Regular Members w/periodicals:	4				
New Members 1st year only		na	na		
Regular Member renewal w/periodical class mail		\$144	\$236		
Regular Member renewal w/1st class mail	.\$66	\$186	\$306		
Overseas Membership					
Overseas Members w/periodicals:					
☐ New Members 1st year only	\$46	na	na		
<ul> <li>Overseas Member renewal w/periodical class mail.</li> </ul>		\$144	\$236		
Overseas Member renewal w/1st class mail	.\$66	\$186	\$306		
Other SDC Items					
☐ Donation to SDC Museum Fund		.\$			
☐ Donation to SDC Restoration Fund		.\$			
☐ Donation to National Museum Endowment Fund*		.\$			
☐ Donation to Studebaker National Foundation* (*Tax deductible donation)		.\$			
☐ Membership Pin - (specify year-pin) Prices on p.15					
(10,15,20,25,30,35,40,45,50 years) years					
Number of pins (1 or 2)_					
TOTAL AMOUNT ENCLOSED:		.\$			

	, complete the application, send or money order in US funds to:			
The Stu	debaker Drivers Club, Inc. 5, Maple Grove MN 55311-6715			
Or use VISA	or <b>Master Card,</b> call 763-420-7829,			
	or			
	3-420-7849 or Email: sdc@			
	ereg.com for information. Or visit:			
5.5.5.5.5.5.5	studebakerdrivesclub.com			
	write with change of address.			
<ul> <li>DO NOT send ads with your membership;</li> <li>ALL members of local SDC chapters must</li> </ul>				
also be national SDC members.				
Name (first) (last)				
Address	Ol-t- 7-			
	State Zip			
	Birth date:			
E-mail:				
□ VISA	Card#			
	Expiration			
	Signature			
	Signature			
If new member, s	source of referral:			
If renewal, month	n due:			
Member#				
Please list you	ur Studebakers, including year, model, serial numbers, on a separate page.			