



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

NORTHWEST PILOT CAR ASSOCIATION

P.O. Box 94, Humptulips, WA 98552

Annual Fee **\$25.00**

Membership Application

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)

- | | | |
|---|---|---|
| <input type="checkbox"/> Front /Lead Escort | <input type="checkbox"/> Route Surveys | <input type="checkbox"/> VHF Radio |
| <input type="checkbox"/> Rear Escort | <input type="checkbox"/> Certified Pilot/Escort | <input type="checkbox"/> CB Radio |
| <input type="checkbox"/> High Pole | <input type="checkbox"/> Steer person | <input type="checkbox"/> Commercial Auto Ins. |
- (send ACCORD form to NWPCA)

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

Occupation: _____ Title: _____

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