

Application for Membership

Type: Standard 12-Month Membership: \$120 VIP 12-Month Membership: \$250
Standard Lifetime Membership: \$1,250 VIP Lifetime Membership: \$3,500

Info: NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE: _____ ALTERNATE PHONE: _____
EMAIL ADDRESS: _____
(LAMBORGHINI OR OTHER EXOTIC OWNED (IF ANY): _____)

Pay: FOR CHECK PAYMENT: MAIL FORM WITH A CHECK ENCLOSED FOR THE LEVEL SELECTED
FOR CREDIT CARD PAYMENT: MAIL FORM WITH THIS PAYMENT SECTION COMPLETED
CARD TYPE: _____ CARD NUMBER: _____
3or4 DIGIT SECURITY CODE: _____ EXPIRATION DATE: _____
AMOUNT TO BE CHARGED: _____ AUTHORIZING SIGNATURE: _____

FOR PAPERLESS CREDIT CARD PAYMENT ONLINE VISIT: LAMBORGHINICLUBAMERICA.COM

Mail: PLEASE MAIL COMPLETED FORM (UNLESS JOINING ONLINE) TO:
LAMBORGHINI CLUB AMERICA P.O. 701963 PLYMOUTH, MI 48170