

Lincoln and Continental Owners Club

MEMBERSHIP APPLICATION/RENEWAL

LCOC Membership # _____ Referring Member Name _____

Name _____ D.O.B. ____ / ____ / ____ Spouse/Other _____

Address _____ Home Phone (____) _____ CELL (____) _____

City _____ State _____ ZIP _____ Email _____

Bill to: Name _____ Address _____

City _____ State _____ ZIP _____

NATIONAL MEMBERSHIP DUES

US FUNDS ONLY (No Refunds)	Periodical Rate	
	1 Year	3 Years
US, Individual Membership: (Member-1 vote, Spouse/Other is an Associate Member eligible to participate in club activities, but not eligible to vote, hold office, or enter a Lincoln in a National Meet.)	\$60	\$170
Canada and Mexico: (Member-1 vote, Spouse/Other is an Associate Member)	\$84	\$243
All Other Countries: (Member-1 vote, Spouse/Other is an Associate Member)	\$96	\$272
ON-LINE: Canada & International Only (No printed magazine. 1 vote. Spouse/Other is an Associate Member eligible to participate in club activities, but not eligible to vote, hold office, or enter a Lincoln in a National Meet.)	\$40	\$108

Check	Visa Card	Mastercard	Membership dues selected from above:	\$
			Donation to the Lincoln Motor Car Foundation	\$
Card Number			(Donations are tax deductible) Total Payment:	\$
Expiration	_____	CVV _____		
Signature	_____			

Year	Model	V.I.N. (Serial No.)

By checking this box and

INITIALING HERE _____, I agree to have my membership dues automatically deducted from the credit card listed above annually (a recurring charge). I may cancel this at any time by contacting the LCOC membership office listed on this form.

Remit to: (make checks payable to **LCOC**)

LCOC
P.O. Box 1715,
Maple Grove, MN 55311-6715
Ph. 763.420.7829
Fax 763.420.7849
E-mail: LCOC@cornerstonereg.com
Website: www.lcoc.org

