

CACC Registration / renewal form

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ E-Mail \_\_\_\_\_

Dues /\$12.00 per year single    \$15.00 /year family    or    \$1.00 a month (if signing up during the year.)

Amount paid \_\_\_\_\_ check \_\_\_\_\_ cash \_\_\_\_\_                      Date \_\_\_\_\_

Pay at Club or send to CACC - Dave Sibinski  
12375 Flag Ave. S  
Savage, MN 55378

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