



MEMBERSHIP APPLICATION
Capital Region Jaguar Club of New York, Ltd. CRJCN.org

Full Name (Please print): _____

Mailing address: _____

City, State, Zip Code: _____

Email Address*: _____

*Email is the preferred and primary method of communication with Club Members.

Home phone: (_____) _____ Cell phone: (_____) _____

Occupation (optional): _____

Spouse/significant other (optional): _____

Your Jaguar(s): (Year/Model): _____

Note: Jaguar ownership is NOT a requirement for membership...only an interest in Jaguar automobiles.

If you do not own a Jaguar, do you have an interest in Jaguar Automobiles? - ►► _____

Special interests (automotive or other - optional): _____

How did you learn about CRJCN.org? _____

Have you been convicted of a Felony or Misdemeanor? _____ If so, please explain. Use the reverse side and additional pages, as necessary.

Annual Dues Schedule: For applications received January 1 thru June 30- \$75. after July 1, \$65.00; after Oct. 1, \$95.00 (which includes the following year's membership renewal).

Associate Member Dues - \$20.00 (You MUST hold Primary Membership in another JCNA-affiliated club).

Young Enthusiast (age 16-25) discounted membership is also available.

Dues amount enclosed: \$ _____

***I understand all applications are subject to a verification review and approval by the CRJCN.org Board of Directors. *By submitting this application, I consent to a background check.**

Please mail your check (**Payable to CRJCN.org**) with this completed application to:

Vince Marion, 854 Lakewood Ave, Schenectady, NY 12309-6107 - Any Questions, please Tel: (518) 346-6570)

SIGNATURE _____ Date _____

(Rev: 02/27/2025 - Previous revisions are obsolete and cannot be accepted)