

*OpenAir Classic*  
**MEMBERSHIP APPLICATION**

NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (       ) \_\_\_\_\_ CELLPHONE (       ) \_\_\_\_\_

E-MAIL: \_\_\_\_\_

VEHICLE YEAR \_\_\_\_\_ MAKE \_\_\_\_\_ MODEL \_\_\_\_\_

COLOR \_\_\_\_\_ LICENSE # \_\_\_\_\_

REFERRED BY \_\_\_\_\_

I (we) would like to become a member of the OpenAir Classic

My \_\_\_ check is enclosed for \$35.00 (\$33.18 membership + 5.5% WI sales tax)

Complete and mail to:  
OpenAir Tours – Membership  
P.O. Box 5532  
Madison, WI 53705-0532