



WBCCI Unit #170 WDCU Membership Application



Date: _____

Name(s) _____

No Change

Children (or pets) _____

Note: Returning Members enter your name, the date and your WBCCI # . If there are no other changes , check the box for No Change to eliminate the need to fill out the entire form.

Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Telephone: _____ Alt. Telephone: _____

Membership Type: Member --- \$66 annual dues (\$65 WBCCI Dues and \$1 Unit Dues)

(Check one) Affiliate --- \$1 (WBCCI dues will be paid to your primary unit)

If an affiliate , fill in Unit # and Unit Name

WBCCI # _____ Region# _____ Unit# _____ Unit Name _____

Airstream Trailer Information					
	Trailer #1	Trailer #2	Trailer#3	Trailer#4	Trailer#5
Year					
Model					
Length					

Do you have Courtesy Parking? Yes No

Website/Blog: (optional) _____

Email Address: _____

Send this application along with your check made payable to: WBCCI WDCU

Mail to:
John S. DiBella
8425 Toll House Rd.
Annandale, VA 22003

If you have any questions please contact John S. DiBella (Treasurer and Membership Chairman) at the address listed above or by email: jsdbla@gmail.com