

MCCA

P.O. Box 76090  
Atlanta, Georgia 30358-1090

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**We're on the Web!**  
**[www.mccatl.org](http://www.mccatl.org)**

## Application for Membership

Regular (age 18 and up) \$10  Student (age 17 and younger) \$1

Name (please print) \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Email \_\_\_\_\_

I herewith make application for membership in the MCCA subject to the Bylaws of said Club. I also agree to abide by the Code of Ethics adopted by the Club.

Signature of Applicant \_\_\_\_\_

Signature of Parent or Guardian (required for applicants age 17 and younger)

I collect: \_\_\_\_\_

Other collecting interest: \_\_\_\_\_

Mail completed application and payment to:

MCCA, P.O. Box 76090, Atlanta, GA 30358-1090