



Stray Angels Car Club Membership Application

Name. _____

Mailing Address. _____

Phone #. _____

E-Mail. _____

Birthday. _____

Car. _____

Annual Fee \$25.00 Payable to Stray Angels Car Club.
P.O. Box 1936 Roseburg, OR. 97470

Meetings are on the 2nd Sunday of the month. Please contact one of the members below for questions and time and place of the meetings...

Don Larson. 541-672-2359 Gordon Boyd. 541-679-0119
Dallas McCalvy. 541-679-7868 Monna Healy. 541-677-9863