



# AAA/CHRYSLER LLC MEMBERSHIP APPLICATION – INSTRUCTIONS

1. You are eligible for a AAA Michigan membership for each Chrysler Company Car, Employee/Retiree Lease Product Evaluation and/or Company furnished vehicle in your custody. Pool, field and demo vehicles are not applicable.
2. Please fill in all the information on the form to have new AAA credentials issued to you and the eligible AAA Associate Membership in your household (must meet lease car program/AAA eligibility requirements). PRINT first name, initial and last name, leaving a blank box between each.
3. If you are presently a member of AAA Michigan, be sure to fill in your membership card number in the upper right-hand corner and complete the application in its entirety. (Note to present AAA members: Your original year joined —'Member Since' — located in the middle left area of your AAA membership card, will be automatically picked up by AAA and printed on your new AAA/Chrysler membership card.)
4. If you live in the state of Michigan and wish additional AAA Associate Memberships for family members who have vehicles **not covered** under the Chrysler Vehicle program. Fill in the information requested in the area at the bottom of the form and enclose \$26 in check/money order for each AAA Associate Membership purchase. (Made payable to: AAA Michigan)
5. If you live outside of the state of Michigan and wish additional AAA Associate Memberships for family members who have vehicles **not covered** under the Chrysler Vehicle program, please contact your nearest AAA office in your resident state.

## APPLICATION FOR AAA/CHRYSLER MEMBERSHIP

EMPLOYEE / RETIREE NAME		PLEASE PRINT YOUR AAA MICHIGAN MEMBERSHIP CARD NUMBER HERE	
		0 4 7	
RESIDENCE ADDRESS		PHONE NUMBER WITH AREA CODE (RES.) (BUS.)	
ADDRESS (CONTINUED)		CID# (Chrysler Identification Number)	
CITY		STATE ZIP	

## AAA/CHRYSLER ASSOCIATE MEMBER INFORMATION

NAME	RELATIONSHIP
	<input type="checkbox"/> SPOUSE <input type="checkbox"/> SON <input type="checkbox"/> DAUGHTER
NAME	<input type="checkbox"/> SPOUSE <input type="checkbox"/> SON <input type="checkbox"/> DAUGHTER
	<input type="checkbox"/> SPOUSE <input type="checkbox"/> SON <input type="checkbox"/> DAUGHTER
NAME	<input type="checkbox"/> SPOUSE <input type="checkbox"/> SON <input type="checkbox"/> DAUGHTER
	<input type="checkbox"/> SPOUSE <input type="checkbox"/> SON <input type="checkbox"/> DAUGHTER

I apply for membership in AAA Michigan. If accepted I agree to comply with the Articles of Incorporation and the By-Laws, including any amendments adopted during the term of my membership. With respect to each master membership, or any renewal thereof, \$4.50 of each such master membership fee shall be assigned as an annual subscription to *AAA Living*.

APPLICANT'S (CHRYSLER LESSEE/CUSTODIAN) SIGNATURE
<b>X</b>

***(This area applicable ONLY to RESIDENTS in the STATE OF MICHIGAN)***

**Fill in the information below ONLY if you are adding AAA Associate Membership benefits for family members NOT INCLUDED in AAA/CHRYSLER Program.**

Annual dues are \$26.00 for each AAA Associate Membership added below.  
Make check or money order payable to: AAA Michigan

## ASSOCIATE MEMBER INFORMATION

NAME	RELATIONSHIP
	<input type="checkbox"/> SPOUSE <input type="checkbox"/> SON <input type="checkbox"/> DAUGHTER
NAME	<input type="checkbox"/> SPOUSE <input type="checkbox"/> SON <input type="checkbox"/> DAUGHTER
	<input type="checkbox"/> SPOUSE <input type="checkbox"/> SON <input type="checkbox"/> DAUGHTER
NAME	<input type="checkbox"/> SPOUSE <input type="checkbox"/> SON <input type="checkbox"/> DAUGHTER
	<input type="checkbox"/> SPOUSE <input type="checkbox"/> SON <input type="checkbox"/> DAUGHTER

**Note:** Must meet lease car program/AAA eligibility requirements.

\$ _____ Amount Enclosed
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Mail or Fax completed application form to: **Company Car Program, CIMS 484-04-08, 800 Chrysler Drive, Auburn Hills, MI 48326**

5310-1107-PS-D9

**FAX: 248-512-0571   Tieline: 722-0571**