



Central Jersey Military Motor Pool

Membership Application
(Please Print)

Name _____

Address _____

Town, State, Zip _____

Phone- _____

E-Mail address _____

MVPA# _____

Vehicles- 1. _____

2. _____

3. _____

Is your vehicle(s) in running condition? Y N

Would you be willing to participate in parades and other events with your vehicle?

Y N

Send form and \$25.00 to:

CJMMP
750 Sergeantsville Rd
Stockton, NJ 08559.

Meetings are held every First Wednesday of the Month at the
American Legion Post 12 in Somerville, NJ
1900 HRS