MEMBERSHIP / RENEWAL APPLICATION



Please fill out the entire form!

Rev. 01/2022

CHECK BELOW	N FOR TYPE OF M	EMBERS	HIP: (Members	ship du	es are non-refundable)
SINGLE PE \$30.00 a yea	RSON MEMBERSH r	IP			RSHIP Member and significant other)
APPLICANT:	NEW MEMBER	RENEW	VAL MEMBERS	SHIP	
Date/	_/				
First Name			_Last Name _		
Address					Apt. #
City			State		Zip
Home Phone		E-r	nail		
(DUAL MEMBI	E <i>rship only)</i> sp	POUSE C	OR SIGNIFIC	ANT C	OTHER:
First Name			_ Last Name		
Date of Birth	//	V	/edding annivers	sary da	ite//
E-mail			_ Cell Phone _		
VEHICLE INFO	DRMATION:				
Do you currently	own a Corvette?	Yes	No		
Years, Coupe, Co	onvertible, Hardtop, Co	olor, Etc?			

FIELD OF INTEREST, EXPERTISE, OTHER HOBBIES OR ADDITIONAL NOTES:

I don't have a computer and/or I need a print copy of the newsletter
MAIL PAYMENT AND APPLICATION TO: P.O. Box 13122 • Green Bay, Wisconsin 54307-3122 Or drop off at next Club Meeting
FOR OFFICE USE Date of Application Approval/ By: