



MEMBERSHIP APPLICATION

Please Print Neatly.

Date of Application: _____

Applicant's Name (voting member): _____

Spouse/Significant Other's Name (non-voting member): _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone Numbers: _____ (Home) _____ (Work) _____ (Cell)

Email Address: _____

Applicant's Birthday (MM/DD): _____

Spouse/Significant Other's Birthday (MM/DD): _____

Corvette Information:

1. Year: _____ Coupe: Convertible: Color: _____

Model: _____

2. Year: _____ Coupe: Convertible: Color: _____

Model: _____

Hobbies/Other Interests: _____

Occupation: _____

Are you a Veteran? Yes No If Yes, Branch of Service and Dates: _____

Please complete and return this form directly to a club officer, or mail with your check for \$60.00 in payment for your first year's dues. Subsequent dues will be \$50.00 per year unless otherwise established.

Make check payable to: CLUB CORVETTE OF CONNECTICUT, INC., PO BOX 120236, EAST HAVEN, CT 06512

Please plan to attend our next general membership meeting. These meetings are held on the first Tuesday of each month, 7:00 PM, at Local Kitchen and Beer Bar, 850 W. Main St. (Rte. 1), Branford CT 06405.

Directions are provided on the Contact Us page of the Club Corvette of Connecticut website.

Thank you for submitting your application and we look forward to meeting you.

When you arrive at the meeting, please come to the front table and introduce yourself to one of the club officers.