



First State Corvette Club Membership Application

Name: _____ Home Phone: _____

Address: _____ Cell Phone: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Your Birth Date: (mm) _____ (dd) _____

Spouse or Significant Other

Name: _____ Cell Phone: _____

Email: _____ Birth Date: (mm) _____ (dd) _____

Corvette Information

Year: _____ Body Style: _____ Color: _____
Convertible or Coupe (circle one)

2nd Corvette

Year: _____ Body Style: _____ Color: _____
Convertible or Coupe (circle one)

Name of Sponsor (if any): _____

Date Joined: _____ **Paid:** _____

Applicants must bring the completed application to a meeting of the First State Corvette Club any first Wednesday of any month. Go to www.firststatecorvetteclub.net to find the current month's meeting place and times.