



GREATER NEW ORLEANS CORVETTE CLUB

MEMBERSHIP APPLICATION

(Please Print or Type)

NEW MEMBER _____ RENEWAL _____

LAST NAME _____ FIRST NAME _____ MI _____

ADDRESS _____

CITY _____ STATE _____ ZIP Code _____

BIRTHDATE _____ EMPLOYER _____

HOME PHONE _____ CELL PHONE _____ WORK PHONE _____

EMAIL ADDRESS _____

SPOUSE/ASSOCIATE

NAME _____ BIRTHDATE _____ CELL PHONE _____

WORK PHONE _____ Employer _____

EMAIL ADDRESS _____

CORVETTE INFORMATION

YEAR _____ BODY STYLE _____ COLOR _____

YEAR _____ BODY STYLE _____ COLOR _____

YEAR _____ BODY STYLE _____ Color _____

PLEASE CHECK APPROPRIATE MEMBERSHIP

_____ \$100.00 REGULAR MEMBERSHIP (INCLUDES 2 ADULTS)

_____ LIFETIME MEMBER (NO PAYMENT DUE)

_____ \$50.00 SPOUSE/PARTNER OF LIFETIME MEMBER

CHECKS SHOULD BE MADE PAYABLE TO GNOCC AND MAILED TO:

GREATER NEW ORLEANS CORVETTE CLUB, PO BOX 113244, METAIRIE, LA 70011

FOR CLUB USE ONLY

DATE RECEIVED _____ AMOUNT _____ CHECK NUMBER _____