

CORVETTES WEST MEMBERSHIP APPLICATION

P.O. Box 336177, Greeley, CO. 80633-0603

www.corvetteswestco.com

Please Print Clearly---Thanks You

Date_____ Sponsoring Member_____

Name:_____

Address:_____

City:_____ State:_____ ZIP Code:_____

Spouse or Significant Other (S/O)_____

Birthday: Self (Mo/Day)_____ S/O (Mo/Day):_____

Anniversary Date: (Mo/Date):_____

Home Phone:_____ Work:_____ Cell:_____

Email Address (Please print clearly):_____

Corvette(s):

1. Year:_____ Model (C-?)_____ Make (Conv, coupe, etc)_____ Color:_____

2. Year:_____ Model (C-?)_____ Make (Conv, coupe, etc)_____ Color:_____

3. Year:_____ Model (C-?)_____ Make (Conv, coupe, etc)_____ Color:_____

Mail application to the above address, attn: Treasure. Enclose a check made out to: Corvettes West Car Club in the amount of \$40 (person or couple) or \$20 after July 1. All blanks need to be filled out. Questions regarding membership should be directed to Debbie Schreiner at email address: schreiner7@aol.com