



CHESTER COUNTY CORVETTE CLUB

P.O. BOX 357, LIONVILLE, PA 19353

www.chestercountycorvetteclub.com

Profile & Application for Membership

NAME _____
LAST FIRST MI BIRTHDAY

NAME _____
LAST FIRST MI BIRTHDAY

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ WEDDING ANNIVERSARY _____

E-MAIL _____ CELL PHONE _____

E-MAIL _____ CELL PHONE _____

CORVETTE INFORMATION

YEAR _____ BODY STYLE _____ COLOR _____ TRANS _____

YEAR _____ BODY STYLE _____ COLOR _____ TRANS _____

PROSPECTIVE MEMBER REQUIREMENTS BEFORE ACCEPTANCE OF APPLICATION:

ATTEND 2 (two) MEMBERSHIP MEETINGS. Meeting dates (1) _____ (2) _____

SHOW A VALID CORVETTE REGISTRATION.

REVIEW CLUB BY-LAWS AND OPERATING POLICIES.

(Please Refer to Web Site for Annual Dues, By-Laws and Operating Policies Documents Information)

By checking this box,

You have read, agree with and accept the Club By-Laws and Operating Policies.

APPLICANT SIGNATURE _____ DATE _____

APPLICANT SIGNATURE _____ DATE _____

Approved by Membership Director _____ Date _____