

## MEMBERSHIP INTEREST FORM

Name:	<i>Date</i> .		
Spouse or Partner Name:			
Address:			
City:			
Home Phone:			
E-mail address:			
Spouse or Partner Cell:	tner Cell: E-mail Address:		
Corvette(s) Presently Owned: (co	lor, coupe/convertibl	e, specialty, i.e.	ZR1, Z06, Z51, etc.)
Membership Requirements: If a	ı <b>vacancy exists</b> , pro	spective membe	ers are required to attend
3 club functions prior to becomin			
must include at least one meeting	_		•
members. You will be notified it	f there is no vacanc	<b>y</b> .	
Dues: Yearly dues run from Janu	uarv throuah Decemb	er of each vear	and covers two people.
Dues are \$50.00 annually (plus th	•	•	• •
depending on the month joined. [			•
You have a period of 90 (ninety d	ays) from your first	event to fulfill	your requirements for
membership. (Special circumstar	nces may be considere	ed.)	
Mail this form to "Corvette Cruis	ers" c/o Jean Doyle,	1745 Arash Cir	cle, Port Orange, FL.
32128. For additional informatio	n or questions, conta	ct President Jo	hn Doria at
c8doria@gmail.com or VP Gary Sv	wanson at <u>ges4765@</u>	notmail.com	
FOR CLUB USE ONLY			
1 <sup>st</sup> Event:	2 <sup>nd</sup> Event	:	
3 <sup>rd</sup> Fvent:			