

Vetts "R" Us
Corvette Club Of Lake County, FL
Membership Application

Believing in the purpose of this club and with a willingness to promote the welfare of the club by regular attendance at meetings and events, I/we hereby make application for membership.

(Please Print) Date _____

Your name _____

Occupation: _____ Birthday _____ Anniversary _____

Name of spouse/significant other: _____ Birthday _____

Occupation: _____

Primary street address: _____

City _____ State _____ Zip _____

Are you a full-time FL resident? Yes ___ No ___ If No, Out-of-State address:

Primary Phone: _____ Secondary phone: _____

Primary E-Mail address: _____

Secondary E-Mail address : _____

Please describe the Corvette(s) you own (Include year, color, coupe/convertible, etc.)

Have you ever been a member of another Corvette Club? Yes ___ No ___

If so, where, when, etc. _____

Would you be interested in serving on a club committee or leading a cruise? Yes ___ No ___

Date and location of Vette R Us Club meeting or event you attended _____

1 – Name desired on name tag _____

2 – Name desired on name tag _____

Please complete and return this application to a Club Officer with dues,

New member: single \$50; couple \$75

