



Corvettes of Clarksville

Membership Application

Last Name _____ First Name _____

Address _____

Spouse/Significant Other Full Name _____

Member:

Cell Phone _____

Email _____

Birth Month _____

Spouse/Significant Other:

Cell Phone _____

Email _____

Birth Month _____

We like to show member pictures on our website. We also provide a membership roster to our club members with personal information. Personal information is NOT shared with anyone other than our club membership. Please check below:

I ____ consent.

I ____ do not consent

Now for the important stuff!

Corvette #1 Year _____ Color _____ Body Style _____

Corvette #2 Year _____ Color _____ Body Style _____

Corvette #3 Year _____ Color _____ Body Style _____

Example 2016 Arctic White Z51 Stingray Coupe

Attach a check payable to Corvettes of Clarksville.

\$35 for an individual Membership or \$45 for a Couple Membership.

Application forms and payment are accepted at club meetings, any official club events, or simply mail to:

Corvettes of Clarksville
P.O Box 31625
Clarksville, 37040-0028

I have read and agree to abide by the By-Laws of Corvettes of Clarksville.

Club Members Signature _____ Date _____

Revised Feb 2024