## NORTH BAY CORVETTE ASSOCIATION MEMBERSHIP APPLICATION

Membership applicant must be 18 years of age or older at the time of initiation, must be a registered owner of a Corvette automobile, have a valid driver's license and have and maintain automobile insurance of sufficient coverage limits to comply with the minimum required by California state law.

EXCERPTS FROM NBCA BY-LAWS

ARTICLE II

PURPOSE OF ORGANIZATION

The primary purpose of the Association is:

- A. To encourage interest in the ownership of Corvette automobiles.
- B. To promote favorable relationships with the general public.
- C. To exchange ideas, general information and technical data relative to Corvettes and Corvette owners.
- D. To actively support sanctioned sports car competitions in their various forms.
- E. To cultivate safe driving habits and stimulate the pride of ownership among Corvette owners.
- F. To secure the latest technical information, literature, etc. from the factory and related sources.

## ARTICLE III, SECTION A, PARAGRAPH 1

G. Attendance at two Association functions. (Pre-requisite to membership)

<u>New Members</u>: Dues period covers January 1 to December 31. Dues paid after September 1 is good for the balance of the current year and automatic renewal for the following year.

Make check out to **NBCA** for either **\$115.00** if Primary member and Associate member -OR- **\$105.00** if Primary member only **(Dues breakdown -\$60** NBCA initiation fee, **\$10** NBCA dues, NCCC Primary member dues **\$35**, NCCC Spouse/Companion dues **\$10**.)

"I have read and understand the above statements and do hereby pledge to actively support and participate in all North Bay Corvette Association events, competitive and social, to the best of my ability and the time that I have available. I will comply with the by-laws of the Association, a copy of which I have received."

Application Date	Applicants Signature			
rimary Member Last Name First Name		Da	Date of Birth	
Street Address	City	Stat	te Zip Code	
Email		Cell Phone	Home Phone (if used)	
Occupation	Driver's License#	Driver License	 Evn Date	

## **MEMBERSHIP APPLICATION CONT**

Associate Member Last Name		First Name		Date of Birth	
Street Add	dress	City	Sta	te Zip Code	
 Email			Cell Phone	Home Phone (if used)	
Occupatio	on				
 Car Year	Model	Color		License Plate#	
HP rating	Auto Insurance (	 Company	Policy#	Policy Exp Date	
Tell us an	vthing special about	your car			
	PLICATION TO:				
		NBCA – NEW MEMBER APP PO BOX 2012 SAN RAFAEL, CA 94912-201			
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