



Membership Application

PLEASE PRINT CLEARLY

Information is for club purposes only.

NEW ____ RENEWAL ____

Regular Membership ____ Social Membership ____

Name: _____

Date _____ mm / dd / yy

Street Address: _____

City: _____ State: _____ Zip: _____

E-mail Address: _____

Phone: Home _____ Cell _____

Birth Date: Month _____ Day _____

TELL US ABOUT YOUR CAMARO(S):

Describe your Camaro(s): Year Color Model

Dues: New Member - \$15.00 Renewal - \$15.00 Social Member - \$15.00
*After June 30 - \$7.50 for the remainder of the year

ALL DUES COLLECTED ARE NON-REFUNDABLE

(For Office Use Only) Membership Approved:

Yes ____ NO ____

Waiver Signed: _____

Villages Camaro Club Membership Form rev. 1/16/2020

Amount Collected: _____

Member # _____

Date _____