Vettes "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:	BirthdayAnniversary
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 (In	clude year, color, coupe/convertible, etc.)
Have you ever been a member of another C	orvette Club? Yes No
If so, where, when, etc	
Would you be interested in serving on a club	b committee or leading a cruise? Yes No
Date and location of Vettes R Us Club meet	ing 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 your dues.
New member: single \$30; couple \$50	