

NEW MEMBER APPLICATION FORM

High Desert Corvette Club

P.O. Box 6442

Bend, OR 97708

Website: www.highdesertcorvettes.org

Facebook: High Desert Corvette Club- HDCC



His Name: _____ Date: _____

Her Name: _____

Address: _____

City: _____ State _____ Zip _____

His Cell# _____ Her Cell# _____

His E-Mail: _____

Her E-Mail: _____

His Birthdate _____ Her Birthdate _____ Anniversary _____ (Birth year optional)

Corvette Year, Model & Color: _____

Annual Membership Dues: **\$60** (includes spouse/significant other)

New Members: Please prorate dues monthly to May 31st

Send payment to: High Desert Corvette Club (HDCC), P.O. Box 6442, Bend, OR 97708-6442

How did you hear about us: Member/Friend _____ Website _____ Facebook _____ Other _____

Membership Chairperson only: Date _____ Roster _____ Badge _____ Email list _____

Rev. Sept 2024