

Easton Area Corvette Club

On-Line Membership Application



Please Print Clearly

NAME _____

SPOUSE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE (____) _____ (____) _____ Cellphone

E-MAIL ADDRESS: _____

YEAR _____ CP _____ CONV _____ COLOR _____ ENGINE _____

TRANS _____ SPECIAL OPTIONS _____

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TRANS _____ SPECIAL OPTIONS _____

Check Off Any Corvette Activities That Are Of Interest You :

Car Shows _____ Cruises _____ Caravan Trips _____ Dances _____ Parties _____

Picnics _____ Fun Runs _____ OTHERS _____

Birthday (Month & Day) _____ Wedding Anniversary _____

\$ 20. Membership Fee
\$ 10. One Time Admin. Fee

\$ 30. Total Dues Enclosed



SIGNATURE _____ DATE _____

I hereby agree to abide by all the rules set forth in the Easton Area Corvette Club By-Laws

If you were referred to the club by a E.A.C.C. Member , please include his/her name below :

Member's Name _____

Please mail this Application & Membership Dues to the following address :

EASTON AREA CORVETTE CLUB , P.O. Box 3969 , Easton , PA 18043-3969