



CTV MEMBERSHIP APPLICATION



PLEASE PRINT NEATLY

DATE _____

NAME _____ DOB(MM/DD) _____

SPOUSE/COMPANION MEMBER _____ DOB(MM/DD) _____

ADDRESS _____ HOME PHONE _____

CITY _____ STATE _____ ZIP _____

MEMBER CELL _____ EMAIL _____

SPOUSE/COMPANION CELL _____ EMAIL _____

WEDDING ANNIVERSARY _____

CORVETTE(S) CURRENTLY OWNED (YEAR, COUPE/CONVERTIBLE/Z06, COLOR, MODS, ETC.) _____

CHECK ALL INTERESTS - SOCIALS _____ RALLIES _____ CAR SHOWS _____ AUTOCROSS _____

DRAGS _____ CRUSING (ROAD TRIP) _____

OTHER HOBBIES/INTERESTS/TALENTS _____

HAVE YOU EVER BEEN A MEMBER OF COWTOWN OR ANOTHER NCCC CLUB? NO _____ YES _____

IF YES, NAME OF CLUB _____

HOW DID YOU HEAR ABOUT COWTOWN VETTES? _____

HOW WOULD YOU PREFER TO RECEIVE YOUR LOW DOWN? WEBSITE _____ PRINTED COPY _____

----- TO BE COMPLETED AFTER MEMBERSHIP VOTE -----

I agree to comply with the requirements of the constitution, bylaws, and regulations adopted by the membership of Cowtown Vettes, Inc., with the full knowledge of the responsibilities accompanying that membership.

SIGNATURE _____ DATE _____

SIGNATURE _____ DATE _____

----- TO BE COMPLETED BY MEMBERSHIP COMMITTEE -----

DATE VOTED IN AS NEW MEMBER _____