



Mail to: Pacific Coast Corvette Club
PO Box 14
Coos Bay, OR. 97420

2024 MEMBERSHIP APPLICATION & RENEWAL FORM

New

Application Renewal *

Dues are \$30 per year per household.

New members, please submit only \$2.50 for each month of a partial year.

I/We hereby apply for membership in the Pacific Coast Corvette Club in the classification indicated above. I/We agree to abide by the Constitution and By-laws of the club and regulations governing it's operation as adopted by the membership.

Name: _____ Birthday (month & day) _____

Address: _____ City: _____ Zip: _____

Spouse/Other: _____ Birthday (month & day) _____

Home Phone: _____ Cell: _____

Other Phone: _____ (**Mark preferred number for contact)

Email: _____

Do you want your phone numbers to be published for other members to see? **Yes ___ No ___

CORVETTE INFORMATION

Model: _____ Color: _____ Year: _____

Special Features: _____

Model: _____ Color: _____ Year: _____

Special Features: _____

Signature of Applicant: _____ Date: _____

* Renewal members, please complete full form.