

□ New

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

## 2020 MEMBERSHIP APPLICATION & RENEWAL FORM

☐ Application Renewal \*

Dues are \$30 per year per housel	nold.	
New members, please submit only	\$2.50 for each month of a partia	l year.
I/We hereby apply for membership above. I/We agree to abide by the Coperation as adopted by the membership	Constitution and By-laws of the	
Name:	Birthday (month & day)	
Address:	City:	Zip:
Spouse/Other:	Birthda	y (month & day)
Home Phone:	Cell:	
Other Phone:	(**Mark preferred number for contact)	
Email:		
Do you want your phone numbers	to be published for other membe	rs to see? **Yes No
COR	VETTE INFORMAT	<u>rion</u>
Model:	Color:	Year:
Special Features:		
Model:	Color:	Year:
Special Features:		
Signature of Applicant:		Date:
* Renewal members, please comple	ete full form.	