

MEMBERSHIP APPLICATION

WWW.CHICAGOLANDNORTHCORVETTECLUB.COM



DATE _____

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____

EMAIL _____

NOTE: EMAIL IS OUR PRIMARY FORM OF COMMUNICATION

BIRTHDAY: MONTH _____ DAY _____

CORVETTE INFORMATION

YEAR _____ BODY STYLE _____ COLOR _____

YEAR _____ BODY STYLE _____ COLOR _____

\$40.00 Annual Household Membership Fee is due each January 1st

Cash or Check ONLY

Renewal _____ / New Member _____

Mail this application with check payable to: Chicagoland North Corvette Club
c/o Bill Stasek Chevrolet
700 W. Dundee Rd.
Wheeling, IL 60090

Or email us at: Membership@ChicagolandNorthCorvetteClub.com

Visit our website: ChicagolandNorthCorvetteClub.com and "LIKE" us on facebook