



**Chicagoland North Corvette Club  
2023 Membership Application**

Date: \_\_\_\_\_

**Please PRINT and fill in ALL information and complete 2<sup>nd</sup> page. Thank you.**

**For renewals: Please highlight any information that may have changed.**

Name Primary: \_\_\_\_\_

Spouse/Partner Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_

Spouse/Partner Phone #: \_\_\_\_\_

Primary Email: \_\_\_\_\_

Spouse/Partner Email: \_\_\_\_\_

Birthday: Month \_\_\_\_\_ Day \_\_\_\_\_

<b>Corvette Information:</b>		
Year _____	Body Style _____	Color _____
Year _____	Body Style _____	Color _____

**In case of emergency, please contact:**

Emergency Contact(S) \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact(S) \_\_\_\_\_ Phone \_\_\_\_\_

**\$50 Annual Membership Fee – Send by December 15<sup>th</sup>, 2022 (for renewal)**

Renewal \_\_\_\_\_ New Membership \_\_\_\_\_

**Cash or Check ONLY**

**Chicagoland North Corvette Club c/o Bill Stasek Chevrolet  
700 W. Dundee Rd.  
Wheeling, IL 60090**

Email us at: [Membership@ChicagolandNorthCorvetteClub.com](mailto:Membership@ChicagolandNorthCorvetteClub.com)  
Visit: [www.ChicagolandNorthCorvetteClub.com](http://www.ChicagolandNorthCorvetteClub.com)  
Follow us on Facebook

Office Use Only: Check # \_\_\_\_\_ Member # \_\_\_\_\_

**Chicagoland North Corvette Club (CNCC)  
Liability Release Form**

IN CONSIDERATION of being permitted to participate in any CNCC EVENT(S), EACH OF THE UNDERSIGNED, for themselves, personal representatives, heirs and next of kin:

- HEREBY RELEASES, WAIVES, DISCHARGES AND CONVENANTS NOT TO SUE CNCC FROM ALL LIABILITY TO THE UNDERSIGNED, their personal representatives, assigned heirs, and next of kin FOR ANY AND ALL LOSS OR DAMAGE, ANY CLAIM OR DEMANDS THEREFORE ON ACCOUNT OF INJURY TO THE PERSON OR PROPERTY OR RESULTING IN DEATH OF THE UNDERSIGNED ARISING OUT OF OR RELATED TO THE EVENT (S), WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
  
- HEREBY acknowledges that he/she is in good physical and mental condition, has a good driving record, is not currently taking any medication, drugs, or other substance that would impair his/her ability to drive safely, and is at least eighteen years of age with a current and valid driver's license.
  
- HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the Releases and each of them FROM ANY LOSS, LIABILITY, DAMAGE, OR COST he/she may incur arising out of or related to the EVENT(S) WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
  
- HEREBY ASSUMES FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE arising out of or related to any CNCC EVENT(s) whether caused by the NEGLIGENCE OF RELEASEES or otherwise.
  
- HEREBY acknowledges that THE ACTIVITIES OF CNCC MAY BE DANGEROUS and involve the risk of serious injury and/or death and/or property damage. Each of THE UNDERSIGNED also expressly acknowledges that INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.
  
- HEREBY agrees that this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement extends to all acts of negligence by the Releases, INCLUDING NEGLIGENT RESCUE OPERATIONS, and is intended to be as broad and inclusive as is permitted by the laws of the Province or State in which any EVENT(s) are conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, I FULLY UNDERSTAND ITS TERMS, I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW. I ALSO ACKNOWLEDGE THAT IN THE EVENT A MINOR CHILD OF MINE IS PARTICIPATING IN ANY CNCC EVENT(S), I AM ALSO SIGNING THIS RELEASE AS PARENT AND GUARDIAN OF SAID MINOR CHILD IN FULL ACKNOWLEDGEMENT. I, ON BEHALF OF SAID MINOR CHILD, AM ABDICATING THE SAME SUBSTANTIAL RIGHTS THAT WOULD NORMALLY ACCRUE TO SAID MINOR-CHILD.

**By signing this form, I also acknowledge that my driver's license and automobile insurance coverage is up to date.**

Print \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_