

CORVETTE CLUB OF THE PALM BEACHES

2017 MEMBERSHIP APPLICATION / RENEWAL

Date: _____

Member Since: _____

NAME (S) _____
ADDRESS _____
CITY _____ STATE: _____ ZIP CODE: _____

BIRTHDAY: (Month) MEMBER _____ CO-MEMBER _____
PHONE #s: _____ HOME _____
Please _____ WORK _____
Print _____ CELL _____
_____ E-MAIL _____

YEAR CORVETTE	TYPE (Coupe/Roadster/Special)	COLOR (Exterior/Interior)
_____	_____	_____
_____	_____	_____
_____	_____	_____

Occupation (optional) _____

Dues:

Each new membership includes: 1 CCPB Club Shirt and club name badge
Shirt Size (please circle): Men S M L XL or XXL
_____ \$75 Per Person Ladies S M L XL or XXL
_____ \$5 Per Person Please add if you want your name embroidered on shirt
_____ \$35 Yr. Renewal Per Person (due by Jan.31, \$45 thereafter)
_____ \$10 Additional Name Badge
Total for above _____

I understand and agree that membership in the Corvette club of the Palm Beaches includes a responsibility to the club and it's members. I hereby pledge my support to the Club and all Club activities. I will conduct myself in a manner that will not bring discredit to the club, its members or me. I understand that the terms of Club membership are governed by the Club by-laws.

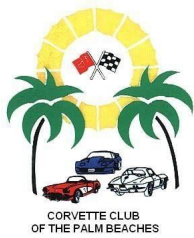
YOU MUST BRING THIS APPLICATION OR MAIL IT WITH YOUR MONEY. Money will not be accepted without a completed application.

Signature _____

Make checks payable to: Corvette Club of the Palm Beaches
Mail to: Lynda Campisi (Treasurer)
4242 Hemlock Street
Palm Beach Gardens, FL, 33410

Gloria Schulman – CCPB Membership Chairperson

Our Corvette Club also offers the ability to advertise your **Member Business Services** rendered. If you would like to run a yearly advertisement you may apply on following page.



CORVETTE CLUB OF THE PALM BEACHES

Members Business/Personal Service Application

To place an advertisement the size of a business card on the CCPB Members Business/Personal Service Page, you must complete the Members Business/Personal Service Application Form below.

Name of Company
Type of Services to Provide:
Work Locations:
Contact Name:
Business Phone:
Cell Phone:
Email:

Applicants Signature _____ **Date** _____

_____ **Check here if business card or form is attached.**

Disclosure

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