



# SPACE COAST VETTES

## Membership Application

(One membership per family)

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Spouse: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Alt Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Birthday (Mo/Day) : \_\_\_\_\_ Spouse Birthday (Mo/Day): \_\_\_\_\_ Anniversary (Mo/Day): : \_\_\_\_\_

### Tell us about your Corvette(s)

Year: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

Year: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

Year: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

*I agree to follow all rules and regulations as stated in the Space Coast Vettes Constitution and By-Laws set by this club as long as I hold an active membership:*

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

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

### Club Activities Attended

#1: \_\_\_\_\_ Date: \_\_\_\_\_ Member Initials: \_\_\_\_\_

#2: \_\_\_\_\_ Date: \_\_\_\_\_ Member Initials: \_\_\_\_\_

#3: \_\_\_\_\_ Date: \_\_\_\_\_ Member Initials: \_\_\_\_\_

