

Corvettes of Naples

Membership Application – Print Clearly

Primary Name _____ Date of Birth _____

Spouse/Other _____ Date of Birth _____

Street Address _____

City _____ State _____ Zip _____

Home Phone _____ Business Phone _____

Primary Cell _____ Spouse/Other Cell _____

Primary Email _____ Spouse/Other Email _____

Current Corvette(s):

Year _____ Body Style _____ Color _____

Year _____ Body Style _____ Color _____

Year _____ Body Style _____ Color _____

Activities primarily Interested In:

Autocross ___ Concours ___ Fun Rally ___ Family Events ___ How to Shops ___ Dinner Cruises ___

Other (Specify) _____

Are you a member in another corvette clubs? Yes ___ No ___

If yes, Primary NCCC# _____ Spouse/Other NCCC# _____

Primary Signature _____

Spouse/Other Signature _____

Send check in the amount of \$75.00 for annual dues along with this application to:

T J Thomas

1926 Cornwallis Pkwy.

Cape Coral, FL 33904

For More Information:

Call 847-650-9715 or 239-772-0705