



MEMBERSHIP APPLICATION

Name _____ Spouse _____

Address _____ City/ST/ZIP _____

Phones (home) _____ (work) _____ (mobile) _____

Email (please print clearly) _____

Occupation _____

Hobbies / Interests _____

How did you hear about us _____

Tell us about your Corvette(s). Please include year, color, body style

Year _____ Color _____ Body Style _____

What type of club activities are you most interested in? _____

Signature _____ Date _____

Annual dues are payable by Dec 1: _____ \$20 Individual _____ \$30 Family

Central Oklahoma Corvette Club
PO Box 721290
Oklahoma City, OK 73172-1290
www.centralokcorvetteclub.org

Meetings are held the 3rd
Tuesday of each month at
7:15 PM at the Warr Acres
Community Center,
4301 N. Ann Arbor Ave, Warr
Acres

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