



Wasaga Beach Corvette Club

MEMBERSHIP APPLICATION

Personal: (All information provided is for Executive use only.)

Name : _____

Address : _____

Residence Phone: _____ Business Phone: _____

Cell. Phone: _____ E:mail: _____

Please complete the following section in full

Corvette: Year: _____ Model: _____ Engine Size: _____

Licence No: _____ Colour: _____

Transmission (Standard or Automatic): _____

Insurance: Company: _____

Policy No.: _____ Liability: \$ _____

Applicant's Signature _____

Membership Dues Structure

(Membership runs from January to December)

\$60.00 per year on or before December 31st of current year. Late payment January 1st. and on carries a \$20.00 premium above current membership fee. New membership dues \$60.00.

Make cheque payable to: Wasaga Beach Corvette Club

Wasaga Beach Corvette Club
Suite 538
4-115 First Street
Collingwood, Ontario
L9Y 4W3