

RIVER CITY CORVETTE CLUB, INC.

MEMBERSHIP APPLICATION

EXPIRATION IS DECEMBER 31 ANNUALLY \$40 PER INDIVIDUAL/FAMILY



Date:		
Name:	Birthday (MONTH/DAY)	
Spouse/Partner Name:	Birthday (MONTH/DAY)	
Address:		
City:	STATE:	Zip Code:
Home Phone:	Cell Phone:	
Email Address:	Spouse Email Address	
Year Coupe/Convertible:	Color:	Years Owned:
Year Coupe/Convertible:	Color:	Years Owned:
*Car Description/modifications/history: _		
*Hobbies, interests, favorite music, sport	s team, etc	
**Not required, for information purposes	only as an introduction to the cl	ub via the club newsletter.
Special skills/talents that may help the clu	ıb:	
By signing below, I agree to abide to the F	River City Corvette Club, Inc., By-I	aws and Code of Conduct.
any of its members, officers, directors, or may result from my participation in any e	ganizers, associates or the like fo vent sponsored or co-sponsored River City Corvette Club, Inc., its my passengers, drivers or third po-sponsored by the River City Cor	•
Signature:	Date:	
Make checks payable to: River City Corve	tte Club, Inc., <u>include this form c</u>	ompleted, and mail to:

RCCC P.O. Box 1061 Hixson, TN 37343

Meetings are held the third Monday of each month at 5:30~pm to eat, and 6:30~pm meeting. Logan's , Hixson, TN 37343

http://www.rivercitycorvetteclub.com https://www.facebook.com/rivercity.corvetteclub