

BLUEGRASS CORVETTE CLUB

P.O. Box 11551
Lexington, KY 40576-1551

2020 Membership Form

____ \$35 Single ____ \$70 Couple, New () Renewal () Junior () \$14
Name: _____ Birthday Month /Day _____

Spouse: _____ Birthday Month / Day _____

Address: _____ Apt # _____

City: _____ ST: _____ Zip _____

Phone #'s (Circle primary number where we can reach you or leave messages)

Home: _____

Cell: _____ Spouse Cell: _____

E-mail address(es): (Club information will be sent via e-mail on a regular basis)

Spouse _____

Your T-Shirt size: (NEW MEMBER) S M L XL XXL

Spouse T-Shirt size: (NEW MEMBER) S M L XL XXL

Corvette Information:

Year: _____ Model: _____ Color: _____ Vanity Plate: _____

Year: _____ Model: _____ Color: _____ Vanity Plate: _____

Signature: _____ Date: _____

(To be completed by Treasurer)

Amount received: _____ by: _____ Cash () Check ()