## CALIFORNIA ORGANIZED REDDING VETTE SET C.O.R.VETTE SET

DATE:			
Application is hereby submitted for membership VETTE SET. It is understood that all membership defined in the current C.O.R.Vette Set By-Laws	hip requirement		
APPLICANT INFORMATION			
Name:	Birthday: Month		_Day
Spouse/Other:	Birthday: Month		Day
Address:Street			
Street	City	State	e Zip
Anniversary (if applicable): Month	_ Day	Year_	
Home Phone:() Work Phone:() Cell Phone:() Do you want your phone number(s) published on the Membership Roster? Yes: No:			
E-Mail Address:self			
E-Mail Address:Spouse/Other			
Optional Information: Occupation/Business			
CORVETTE INFORMATION			
Model: Coupe: Roadster: Year:_		Color:	
Special Features:			
Model: Coupe: Roadster: Year:_	(	Color:	
Special Features:			
This application must submitted to any Board Member a	t a regularly planne	ed meeting, or	mail to:
CORVette Set 11531 Vista Del Rio Redding, CA 96003-8663			
Signature of Applicant		ignature of Re	eceiving Board Member