



NORTH SHORE CORVETTES OF MA, INC.

MEMBER APPLICATION



2009 Membership (January 1 to December 31, 2009)

() Membership 1 or 2 persons in the same household with 1 vote: \$50.00

If this is a Household Membership PLEASE PRINT the full name (first and last) of individual to hold the vote in the household. (PRINT as CLEARLY as POSSIBLE)

(First Name) _____ (Last Name) _____

() Joint Membership 2 persons in the same household with 2 votes: \$65.00

PRINT the full names (first and last) of the two individuals within the same household that will hold the two votes. (PRINT as CLEARLY as POSSIBLE)

Vote 1 (First Name) _____ (Last Name) _____

Vote 2 (First Name) _____ (Last Name) _____

Have you ever been a member of North Shore Corvettes of Massachusetts before? No () Yes ()

I would like to have the Newsletter mail to my address at the cost of \$36.00 per year. No () Yes ()

Please make check payable to: North Shore Corvettes of MA, Inc. (NSCM)

Mail to: North Shore Corvettes of MA, Inc.
P.O. Box 2212
Methuen, MA 01844

(PRINT CLEARLY as POSSIBLE and Complete all of the Form)

NAME _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP CODE** _____

HOME PHONE _____ **CELL PHONE** _____

EMAIL ADDRESS _____

CORVETTE INFORMATION

YEAR _____ **STYLE** Roadster/Convertible () Coupe () **Color** _____

SIGNIFICANT OTHER INFORMATION

NAME (First & Last) _____

I / We read and agree to abide by all the provisions set forth in the NSCM Guidelines including the NSCM's Code of Ethics as adopted by the E-Board and Membership. (Both are posted on NSCM Website)

Signature _____ Date _____

Signature _____ Date _____

Thank you for joining the North Shore Corvettes of MA, Inc. Save the Wave! **TOTAL AMOUNT** _____

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OFFICIAL USE ONLY: Received Check # _____ Amount \$ _____ Date _____ Form # 05-24-09