

STATEN ISLAND CORVETTE CLUB INC.

P.O. BOX 80213

STATEN ISLAND, N.Y. 10308



E-Mail: Webmaster@sicorvetteclub.com

Website: SICORVETTECLUB.COM

THE STATEN ISLAND CORVETTE CLUB INC.

APPLICATION FOR MEMBERSHIP

DATE: _____

Membership Dues - \$50.00 each year

PERSONNEL INFORMATION

Name: _____ Spouse/SO: _____

Address: _____ Cell: _____ Home: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____

CORVETTE INFORMATION

Year: _____ Color: _____ Cu.In: _____

HP: _____ Body Style: _____

Notable Features:(if any) _____

** For further information as to where we meet, and what events we have scheduled, you can check it on the website.

I agree to hold harmless the Staten Island Corvette Club Inc., its Officers, Directors, Agents and Employees, for any acts of or omissions which may result in the theft, damage, or destruction of my property or injury to me or others occurring as a consequence of this clubs sanctioned events, but not limited to car shows, cruises, tech sessions or other events wherever located. I have proof of insurance that at least satisfies New York's minimum auto and liability insurance requirements for my vehicle and property and have insurance for my vehicle and property for loss, damage and liability and can provide such proof upon request

Signature: _____