

Grand Strand Corvettes, Inc. P.O Box 163
Murrells Inlet, S.C. 29576

Membership Application

Your Name:	Spouse/Other Name:	
Address:	 City/State/Zip:	
Phone: Home	Cell Email	·
Birthday: (Month/Day) Yours _	Spouse/Other:	Anniversary:
Corvette (s) Presently Own:		
Year: Cold	or: Typ	oe:
Year: Cold	or: Typ	pe:
Year: Cold	or: Typ	oe:
(If you wish to list more, please	use reverse side.)	
How did you hear about Grand	d Strand Corvettes?	
Please list Car Clubs you are c	or have been a member. Why	did you leave?
Participating in and Volunteering List events you have participate		ib members is encouraged. Please ave done in other car Clubs.
What would you like to see you	ır Car Club participating in? _	



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Membership Application (continued)

All prospective members must be 21 years old and own, or be in the process of obtaining a Corvette in drivable condition. You are encouraged to drive your Corvette to all meetings, weather permitting. Prior to submitting your application for membership, prospective members must attend a Club meeting or event. All applications are subject to approval by the membership

New Member Dues: Renewal: Individual (one adult) \$40.00 \$25.00 Family (two adults) \$60.00 \$35.00

I / We, by execution of this membership application, do hereby release, discharge and pledge to hold harmless Grand Strand Corvettes, Inc., their founding members, officers, directors, members and anyone else connected with them from any known and unknown damage, injuries, deaths, losses, judgments and / or claims from any other causes whatsoever that may be suffered by any and all person or persons, or property resulting from any and all activities of the Grand Strand Corvettes, Inc.

Date:	<u></u>	
Your Signature:	Spouse/Other:	

Notes:

You may bring or mail your membership application to a meeting or mail to the address above. For more information, please visit our web site: www.gscorvettes.com, or contact one of our Officers or Directors.