



Corvettes of Berkshire
P.O. Box 1044
Pittsfield, MA 01202
www.corvettesofberkshire.com

New Member Application

Name _____ Age _____

Spouse/Significant Other _____ Age _____

Mailing
Address _____

City _____ State _____ Zip _____

Best Phone Number to reach you quickly (_____) _____ - _____

E-mail Address (that you check regularly) _____

Corvette info (year, make, & model) _____

What would you like to get out of being a member of this club? _____

_____ All the above information is kept strictly confidential. The \$40 Membership fee includes one associate member (named above). Additional associate members can be paid for as well.

Signed _____ Date _____