

CORVETTE OWNERS CLUB OF HOUSTON MEMBERSHIP APPLICATION

Name _____ Spouse/Other _____

Birthdate _____ Birthdate _____

Address _____

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Phone () _____ Work () _____
Ok to Call ? Yes ___ No ___

Email: _____ Best Time to Call _____

1. Corvette Year : _____ Model _____ Color _____
License Number : _____

2. Corvette Year : _____ Model _____ Color _____
License Number _____

Insurance Carrier : _____

Your Occupation _____

Spouse / Occupation _____

How did you hear about the club? _____

SIGNATURE _____

Shirt Size _____

For Club Use Only

Voted as a Member of COCOH: _____ Date: _____ Paid _____

**Fill out the application, then mail along with \$100 application fee to:
Corvette Owners Club of Houston
9211 West Road Suite 143/206
Houston, Texas 77064**