

Please return this form by any of the methods below:

- 1. Hand the form to a Board member
- 2. Scan or take a picture of it and email it to chips@siouxfallscorvetteclub.com
- 3. Mail it to SFCC Elaine Robinson Treasurer, P.O. Box 994, Mitchell, SD 57301
- 4. Submit on-line and mail a check to the address shown above

Application Date: ____/___/20____

By filling out this application, you are giving the Sioux Falls Corvette Club permission to add your information to our password protected, Members-Only, on-line photo directory (we call it the Buzz Book).

IF YOU DO NOT WISH TO BE LISTED IN THE ON-LINE MEMBERSHIP DIRECTORY BUZZBOOK) CHECK THIS BOX:

If you wish to not include select information in the directory, please check the box next to the information you wish to exclude.

	□ New Member				Returning Member									
Name:														
□ Email:			_											
□ Cell Phone Num	ıber:													
□ Significant Othe	er Name:													
□ Email:			_											
□ Cell Phone Num	ıber:													
□ Address:														
□ City:				_ 🗆 State:			□ Zip Code:							
Corvette(s):														
Year:S	_Style:				Color:									
Year:S	Style:	Color:												
Tell us a little bit about yourself(kids, grandkids, work, hobbies, etc)														
Membership Type:	Cour	ole \$130					С	Si	ngle	\$105				

Please note that the yearly dues can be paid for the coming year beginning November 1st, historically paid at our November banquet, but due by December 31st, so as not to stop receiving member notifications.