



Northern Ohio Chevelle Club Membership/Renewal Form



Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-Mail: _____

Car Info:

Year: _____ Model: _____ Color: _____

Engine: _____ Transmission: _____

Special Features: _____

Other Clubs you belong to: _____



Optional Information

Spouse/Partner Name: _____ Anniversary: _____

Your Birthdate: _____ Spouse/Partner Birthdate: _____

Additional Info: _____

<p>Annual Dues \$25 Make Checks Payable to: Northern Ohio Chevelle Club</p>	<p>Mail to : Northern Ohio Chevelle Club c/o Pat Umstead 21666 North Park Dr Fairview Park, OH 44126</p>
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