



*Vintage Chevrolet Club Dedicated to the
Preservation & Restoration of All Chevrolets*

MEMBERSHIP APPLICATION

OFFICE USE ONLY

AMOUNT _____
 CHECK CHARGE
 DATE _____
 REGULAR JOINT
 FIRST CLASS FIRST CLASS JOINT

Yes! I wish to join the VCCA in its' dedication to the preservation and restoration of Chevrolets.

Renewing Member VCCA # _____ New Member

Name _____ Spouse _____

Address _____

City _____ State _____ Zip Code _____

Telephone (optional) _____ Email (optional) _____

Please List Chevrolets Currently Owned. The ownership of a Chevrolet is NOT a prerequisite for membership.

Year	Model	Body Style	Cyls.	Condition

All new members will receive a Club Badge, Decal, Membership Card and the Club Magazine, "Generator and Distributor." Members will be entitled to free classified advertising in the club magazine and participation in all Vintage Chevrolet Club activities.

- U.S. DUES PERIODICAL MAILING:** Member 1 vote [] 1 YEAR \$35 [] 2 YEARS \$69 [] 3 YEARS \$103
U.S. JOINT DUES PERIODICAL: Member & Spouse 2 votes [] 1 YEAR \$40 [] 2 YEARS \$79 [] 3 YEARS \$118
U.S. DUES 1ST CLASS MAILING: Member 1 vote [] 1 YEAR \$55 [] 2 YEARS \$109 [] 3 YEARS \$163
U.S. JOINT DUES 1ST CLASS: Member & Spouse 2 votes [] 1 YEAR \$60 [] 2 YEARS \$119 [] 3 YEARS \$178
U.S. LIFE MEMBERSHIP: [] \$700 **U.S. JOINT LIFE:** [] \$100 (Spouse of Current Life Member)

CANADIAN DUES: (U.S. Dollars) Member 1 vote [] 1 YEAR \$60

INTERNATIONAL DUES: (U.S. Dollars) [] 1 YEAR \$60

Please remit through Credit Card or International Postal Money Order, remittance must be at United States currency standards.
 Check or money order payable to: Vintage Chevrolet Club of America, Inc. - **DUES ARE NON-REFUNDABLE**

VISA MASTERCARD CHECK AMOUNT \$ _____

 LAST 3 DIGITS OF CVVC CODE LOCATED ON BACK OF CREDIT CARD

Credit Card Expiration Date Month/Year _____/_____

Zip Code for Credit Card address, if different than above _____

Print name as it appears on credit card _____

Authorized Signature X _____ Date _____

Recruited by (VCCA member, optional) _____ VCCA# _____

Where or how did you hear about club? _____

Return Application to:
VCCA Membership Secretary
P.O. Box 609
Lemont, IL 60439-0609