



## Membership form

---

### Personalities

Name / First name .....

Date of birth .....

Profession / Firm .....

Home address .....

Zip-Code / City .....

Phone home ..... Fax home .....

Mobile phone .....

E-Mail home .....

Office address .....

Zip-Code / City .....

Phone office ..... Fax office .....

E-Mail office .....

Postal delivery to  Home adress  Office adress

### Vehicle informations

I own  1 Corvette  several ..... (Quantity)

Year ..... Type .....

Colour ..... Original  Yes  No

Comments .....

### Annual fee

The subscription for the "Vetting" is included

Active member CHF 365.--

Patron member CHF 120.--

I propose the membership as a  Active member  Patron member

Date ..... Signature .....

Please send this membership form back with the following enclosures

1 Photo of yourself, 1 Photo of your Corvette

Please send this form to

**SCCI, c/o P. Witzig, Rosserstr. 33, 3703 Aeschi bei Spiez**