

MEMBER INFO



FIRST NAME

LAST NAME

ADDRESS

CITY

STATE

ZIP

BIRTHDATE

EMAIL

PHONE

HOW DID YOU HEAR ABOUT KCS?

IF REFERRED BY A MEMBER, WHO?

TELL US ABOUT YOURSELF AND WHY YOU WANT TO JOIN.

ABOUT YOUR CAMARO

YEAR

MODEL

COLOR

NICKNAME (IF APPLICABLE)

This agreement is subject to the understanding and agreement to the Corporation's Membership Agreement Principles, and by signing this agreement the member presents and warrants that he/she understands them and will obey the rules and regulations set forth in the principles of the Keystone Camaro Society.

(INITIALS)

SIGNATURE

DATE