



Long Island Vettes, Ltd. ® Membership Application

Prior to mailing in your membership application, we invite you to take a look at our website (address below) and to attend at least one of our general meetings and/or events to meet the people behind the name.

Date: _____

Check #: _____

Name: _____

Street Address: _____

City, State, Zip: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Car Year: _____ T-Shirt size: _____

Birth Month/Day: _____

Referred by: _____

Dues for membership are \$45.00 per member per year
Membership renews on month of sign-up, **not** calendar year
Membership subject to Board approval
Please make check payable to: Long Island Vettes
Please mail your application and check to:

Martha Baker-Fingerhut - Membership Secretary | Long Island Vettes | 51 Smith St. | East Moriches, NY 11940

Please allow adequate time for processing

www.longislandvettes.org

