



NEW MEMBER APPLICATION



Name: _____ Spouse: _____

(Please Print Clearly)

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email Address: _____

(Email used for electronic NEOCC Newsletter and special club notices.)

Camaro Details Year: _____ Model: _____

Color: _____

Features: _____

How did you hear about NEOCC: _____

Membership dues are \$25.00 for the first year, \$20.00 per year thereafter. Make check payable to and mail to:

NEOCC
PO Box 1094
Ravenna, OH 44266

For more information, contact:

Morgan Iorio: Club President (330) 730-3348

Club Email: neocinfo@gmail.com