Application for Membership

Retreads® Motorcycle Club International, Inc., Gateway Region AMA Charter 32338

New Renewal	Date:
Name	Spouse
Address	Phone ()
City	State Zip
Email	Wedding Anniversary/ (Year is Optional)
Birthday/ Spo	use/ (Year is required)
AMA Membership #	and
Recommended by:	Card #
DonationThe Club sugges	sts a minimum Couple: \$20.00 1 Yr; Single \$15.00 1 yr.
PLEASE READ & MUST SIGN	
participate in any event, I do so release and hold harmless the property which might result the Retreads® for any injury result	® cannot assume responsibility for any aspect of my safety and that if I voluntarily on my own assessment of my ability, assuming all risk; and I Retreads® I Motorcycle Club for any injury or loss to my person, re from. I understand that this means that I agree not to sue the ing to myself or my property at any such event. Spouse
Make Checks and mail to:	GATEWAY REGIONAL RETREADS® 8176 Oakland Road Oakland, AR 72661
FOR REGION USE ONLY:	Card Number &
	Date Mailed/
carry with them when they tr by filling in the following box	We will be providing an information booklet for our members to avel. Please indicate if you are willing to be a contact in our bookletes. Indicate with an X if you are able to help by providing any of dge of services available in your area.

Truck	Trailer	Tools	Camping/Lodging