

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 ____/____/____ Spouse ____/____/____ (Year is required)

AMA Membership # _____ and _____

Recommended by: _____ Card # _____ Chapter/Area _____

Donation ____ The Club suggests a minimum Couple: \$20.00 1 Yr; Single \$15.00 1 yr.

PLEASE READ & MUST SIGN

I understand that the **Retreads®** cannot assume responsibility for any aspect of my safety and that if I participate in any event, I do so voluntarily on my own assessment of my ability, assuming all risk; and I release and hold harmless the **Retreads® I Motorcycle Club** for any injury or loss to my person, property which might result there from. I understand that this means that I agree not to sue the **Retreads®** for any injury resulting to myself or my property at any such event.

Signature _____ Spouse _____

Make Checks and mail to: GATEWAY REGIONAL RETREADS®
36 Waterfront Circle
Lakeview, AR 72642

FOR REGION USE ONLY: Card Number _____ & _____

Date Mailed ____/____/____

Retreads® Road Rescue: We will be providing an information booklet for our members to carry with them when they travel. Please indicate if you are willing to be a contact in our booklet by filling in the following boxes. Indicate with an X if you are able to help by providing any of the services or have knowledge of services available in your area.

Truck	Trailer	Tools	Camping/Lodging