



HARRISBURG MOTORCYCLE CLUB

Membership Application – 2012

Office Use Only:

Date Reviewed: _____

2nd Ballot Due: _____

Approved / Declined

Initials: _____

Please Print Clearly

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Are you active on Facebook?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Vehicle most often brought to Club	Make:	Model:	Plate:

MEMBERSHIP DATA			
Type of Application	NEW <input type="checkbox"/>	(Sponsoring member: _____)	RENEWAL <input type="checkbox"/>
If renewal, please list current gate card number (imprinted at top of card):			
Type of Membership	REGULAR (\$50) <input type="checkbox"/> <i>*No dirt riding</i>	DIRT RIDING (\$200) <input type="checkbox"/>	LIFETIME (\$0) <input type="checkbox"/> <i>*Eligible after 25 years</i>
Primary Motorcycle	STREET <input type="checkbox"/>	OFF-ROAD <input type="checkbox"/>	
	Make:	Model:	Plate:
AMA Membership #	Expiration Date		

ADD-ON APPLICANTS	
Spouse	
Full Name	SOCIAL (\$20) <input type="checkbox"/> DIRT RIDING (\$50) <input type="checkbox"/>
Email	AMA # / Expiration (if applicable)
Dependent #1 (under age 18)	
Full Name	DATE OF BIRTH: _____
	SOCIAL (\$20) <input type="checkbox"/> DIRT RIDING (\$50) <input type="checkbox"/>
Email	AMA # / Expiration (if applicable)
Dependent #2 (under age 18)	
Full Name	DATE OF BIRTH: _____
	SOCIAL (\$20) <input type="checkbox"/> DIRT RIDING (\$40) <input type="checkbox"/>
Email	AMA # / Expiration (if applicable)

ADD-ON APPLICANTS (CONTINUED)	
Dependent #3 <i>(under age 18)</i>	
DATE OF BIRTH:	
Full Name	SOCIAL (\$20) <input type="checkbox"/> DIRT RIDING (\$40) <input type="checkbox"/>
Email	AMA # / Expiration (if applicable)
Dependent #4 <i>(under age 18)</i>	
DATE OF BIRTH:	
Full Name	SOCIAL (\$20) <input type="checkbox"/> DIRT RIDING (\$40) <input type="checkbox"/>
Email	AMA # / Expiration (if applicable)

MEMBERSHIP FEE SUMMARY			
	Fee	Quantity	Total
Lifetime Membership <i>(25 consecutive years of Club membership)</i>	\$0		
Regular Membership	\$50		
Dirt Riding Membership	\$200		
Spouse Membership – Social	\$20		
Spouse Membership – Dirt Riding	\$50		
Dependent Membership <i>(under age 18)</i> – Social	\$20		
Dependent Membership <i>(under age 18)</i> – Dirt Riding	\$50		
Additional Dependent Memberships <i>(under age 18)</i> – Dirt Riding	\$40		
Gate Card Fee / Re-Activation	\$30		
Work Party Relief Fee	\$200		
TOTAL FEES DUE (Paid with Check # _____):			

CONFIDENTIALITY

All information on this application and associated waivers / release forms is kept strictly confidential. Your information will only be reviewed by authorized members of the Harrisburg Motorcycle Club Executive Board. These forms will not be disclosed to third parties without your authorization, except as required by subpoena or other legal process.

DISCLAIMER AND SIGNATURE

I certify that all information provided above is true and complete to the best of my knowledge.

If this application is approved, I understand that providing false or misleading information in this application may result in my release.

I acknowledge that the Harrisburg Motorcycle Club retains the right to terminate membership privileges at any time.

Signature _____ Date _____

**Send completed form with check made payable to "Harrisburg Motorcycle Club" to:
Chuck Bohl 715 Hilltop Drive, New Cumberland PA 17070**