

HARRISBURG MOTORCYCLE CLUB

APPLICATION FOR MEMBERSHIP

Application is for: _____ Regular

_____ Social

_____ Dirt Track

Member Sponsor _____

Applicant Name _____ Date of Birth _____

Address _____

City _____ State _____ Zip _____

Home Phone # _____ Work Phone # _____

E-Mail _____

AMA # _____ Expiration Date _____

Type of Motorcycles Owned

Plate or License #

1 _____

2 _____

3 _____

4 _____

I hereby make application for membership in Harrisburg Motorcycle Club Inc.

and agree to abide by the By-Laws and Standing Rules thereof.

Signature _____ Date _____

AMA Paid _____

Passed 1st Ballot _____

Application Paid _____

Passed 2nd Ballot _____