

North American 40+ Touring Riders, Inc.

Yearly membership renewal deadline is December of current year.

Name: _____ Date of Birth: _____

Spouse: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

A.M.A. Member? (Y/N) _____ A.M.A. Number: _____

Make of Motorcycle: _____ Model: _____

Membership Fee:

Full Membership \$13.00 Per Person

\$20.00 Per Couple – with same mailing address

Make checks payable to North American 40+ T.R.

Mail this Form and Check to the address on the website.

Date: _____ Amount Paid: _____

THANK YOU!!