

High Beemers Motorcycle Club
Membership Application
P.O. Box 3127 Sparks, Nevada 89432-3127
BMWMOA Charter Club #337

Primary Member Name _____

Associate Member Name _____

Address _____

City _____ **State** _____ **Zip** _____

Cell Phone _____ **Home Phone** _____

E-mail _____

BMWMOA Member Number: _____ **BMW RA member number:** _____

AMA member number: _____

Make and Model of your motorcycle(s) _____

May we print your address and phone number in the club roster? **Y** **N**

May we print your E-mail address in the club roster? **Y** **N**

Emergency Contact:

Name _____ **Relationship** _____

Address _____ **City** _____ **State** _____ **Zip** _____

Phone _____

Types of Membership:

Primary _____ **\$25.00** Includes annual dinner and monthly newsletter

Associate _____ **\$5.00** (without motorcycle endorsement on driver's license)

RELEASE:

I understand and acknowledge that The High Beemers (motorcycle club) does not assume responsibility for my safety. I participate in any club event voluntarily; and on my own assessment of my ability, road conditions, and any facilities used for club events. I assume all risk for me and any passengers. I release and hold the High Beemers and its officers not responsible for any injury or loss to my person or property that may result from participation in any club event. I certify that I am at least 21 years of age and I am in compliance with my states financial responsibility laws regarding the carrying of proper insurance.

Primary Applicant Signature _____ **Date** _____

Associate Applicant Signature _____ **Date** _____