



MEMBERSHIP APPLICATION OR RENEWAL

Dues: \$50 (Regular) \$10 (under 18)

Name (Please print): _____ AMA No.: _____

Date of Birth: _____ Email: _____

Are you able to save the club some money by getting the *DOPE CAN* via email rather than US Mail?

YES: NO: Are you a Veteran?:

Complete the section below only if your information has changed since last year:

Address: _____ Phone: () _____

Please Note: The club roster including names, AMA numbers and contact information will be available to members in the password-protected section of the club website. If you wish any of your information excluded from that site, please indicate above by circling the identifier for the item(s). Example: **Email:** _____

Bring this form to any monthly meeting, or mail to:
Dale Thome, 21440 S. 78th Ave., Frankfort, IL 60423