

Membership / Renewal Form

Please print your completed application and mail it to our address below along with a copy of your driver's license, a copy of your ERC card (if you have one), and A check or US money order in the amount of \$54 for new applicants and \$36 for renewals:

Please make all checks payable to "Chai Riders MC" and mailed to:

Chai Riders Motorcycle Club 61 Lexington Avenue, Suite 3C, New York, NY 10010

*			
PERSONAL INFORMATION			
MEMBERSHIP TYPE:			
FIRST NAME:	LAST NAME:		
STREET ADDRESS:			
CITY:			
STATE:	ZIP CODE:		
DATE OF BIRTH:	EMAIL	ADDRESS:	
CELL PHONE NUMBER			
PHONE NUMBER:			
OCCUPATION:			
COMPANY			
m			
RIDING INFO			
NUMBER OF YEARS RIDING:			

MOTORCYCLE(S) OWNED:

ARE YOU AN AMA MEMBER:	Yes No	AMA MEMBER #
HAVE YOU COMPLETED THE MOTORCYCLE SAFETY FOUNDATION (MSF) & THE EXPERIENCED RIDER COURSE (ERC):	Yes No	
DATE OF ERC COMPLETION:]
NAME OF SPOUSE OR SIGNIFICANT OTHER:		
SPONSORING MEMBER #1		
SPONSORING MEMBER #2:		
DO YOU HAVE ANY QUESTIONS:		