

Westchester Beemers Motorcycle Club

NEW MEMBERSHIP / RENEWAL APPLICATION FORM

*** required items**

* **Name:** _____

* **Address:** _____

* **City:** _____

* **State:** _____

* **Zip:** _____

* **Email Address:** _____

Home Phone: _____

Work Phone: _____

* **Mobile Phone:** _____

* **In Case Emer. Name:** _____

* **In Case Emer. Contact #:** _____

* **Motorcycle Info:** _____
(Year/Make/Model):

Member of: BMW MOA: Yes No

AMA: Yes No

Iron Butt Assoc. Yes No

Other: _____

How did you hear about us? _____

Years of riding experience: _____

By signing this Application, the undersigned acknowledges that the activity of riding a motorcycle, as either the operator or as a passenger, is an inherently dangerous activity and he/she willingly and knowingly accepts the risks involved in that activity. Accordingly, the undersigned understands that the Westchester Beemers Motorcycle Club ("WBMC") does not assume responsibility for any aspect of their safety; that by becoming a member of the WBMC he/she assumes all risks arising out of its activities; and the undersigned waives any and all rights to assert claims for, and agrees to hold the WBMC, its officers, members and any other person or organization providing services to the WBMC, harmless from, damages arising out of or caused by the activities of the WBMC. v1.15.18

Signature: _____ Date: _____

INSTRUCTIONS: Enclose (1) the signed and dated APPLICATION FORM above and (2) a check in the amount of **\$30.00 for 12 mos./\$50 for 24 mos.** payable to "Westchester Beemers Motorcycle Club" and mail to **Westchester Beemers Motorcycle Club, c/o Larry Kaiden, 5 Piping Rock Way, New Rochelle, NY 10804**

