

Southern New Jersey Retreads

2021 Application/Renewal

Retreads Motorcycle Club International, Inc.
AMA Charter 3233

Please Type or Print Clearly

Date _____

Applicant _____ Co-Applicant _____

Renewal _____ New Member _____ Sponsored By _____

Important: MUST BE SIGNED BY APPLICANT AND CO-APPLICANT, if any.

By voluntarily applying for membership, I understand that the Retreads cannot assume responsibility for any aspect of my safety. I understand the sport of motorcycle riding has an inherent safety hazard. I also understand that my participation in any Retread activity is strictly voluntary and further, I release and hold harmless the Retreads from any loss to my person or property.

Applicant sign: _____ Co-Applicant sign: _____

If renewing, you may skip any further entries **UNLESS** there are changes to the information below.
Be sure to sign above.

Address _____

City _____ State _____ Zip _____ Cell # _____
Phone _____

County _____ E-mail _____

Applicant's Birthday ____/____/____ Co-Applicant's Birthday ____/____/____

AMA number(s) if members _____ Co-Rider _____

Occupation _____ Co-Rider Occupation _____

Make of Motorcycle(s) _____

Other MC club affiliations _____

Please return entire application to:

Jim Dougherty 244 Clarkstown Road ; Mays Landing, NJ 08330

Membership: **\$20 single, \$25 couple** Amount Enclosed \$ _____

Please make check payable to: New Jersey Retreads MC

..... Administration Only

Card(s) # issued _____ Date _____

Card(s) # issued _____ Date _____

Check # _____