

Regular Membership Form
THE GREATER ATLANTA BRITISH
MOTORCYCLE ASSOCIATION

RENEWAL

NEW MEMBER

Personal Information

NAME _____

STREET _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

EMAIL _____

Do you currently own a motorcycle? NO ___

YES: Year _____ Make _____ Model _____

How did you hear about GABMA? _____

Why do you want to join this club? _____

Do you have skills or services you could offer to other members? YES ___ NO ___

List skills or services _____

Are you qualified to offer advice as a specialist? YES ___ NO ___

Are you an AMA member? YES ___ AMA Member Number _____ GABMA could not operate without the support of the American Motorcyclist Association. Please consider joining.

Membership Fees

Regular membership in GABMA is by application only. Club dues are \$20.00 per year for all members and includes a newsletter. Renewing memberships are due every January 1.

How do you wish to receive your newsletter? EMAIL ___ (Preferred) US Mail ___

Payment Information

Please make cheque payable to: The Greater Atlanta British M/C Association

Send completed application & payment to:

GABMA TREASURER
P.O. Box 80567
Atlanta, GA 30366

See our web site for lots of new member information at: <http://www.gabma.us/>