



AMVETS RIDERS  
Application for Membership



Temporary Riders  
Membership Card

CONTACT INFO: I apply for an AMVETS RIDERS Membership and present:

Dues Received From

Name \_\_\_\_\_ \$ \_\_\_\_\_ for \_\_\_\_\_ Dues  
Street \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_ Zip \_\_\_\_\_ D.O.B. \_\_\_\_\_ Sex \_\_\_ Phone \_\_\_\_\_  
Email \_\_\_\_\_ Name of Spouse \_\_\_\_\_  
Signature \_\_\_\_\_ Sponsor \_\_\_\_\_  
Authorizing Officer \_\_\_\_\_ Chapter \_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_ Chapter \_\_\_\_\_ State \_\_\_\_\_  
The Sum of \$ \_\_\_\_\_ Dues for Year \_\_\_\_\_  
Dues Rec. By \_\_\_\_\_  
Signature \_\_\_\_\_  
Phone Number \_\_\_\_\_