

## Oregon Trail Chapter of the AMCA Membership Application

Name	Spouse:
Address:	
City, State, Zip:	
AMCA # (required ) :	Phone:
Email address:	
We'd like to know r	nore about our members. (Pictures are also appreciated!)
First motorcycle, ma	ke/model?
Who introduced you	to riding?
First/early riding exp	periences
Current motorcycles	
Motorcycle reports (	(long trips, memorable rides)
Competition experier	nces
Why did you join the	e Oregon Trail Chapter?

To join/ renew send this completed form and \$15 dues to:

John Davey, OTC Treasurer, 2165 Norwood St, Eugene, OR 97401, ph: 541-852-8023 john@riverroofing.com Annual dues are paid on calendar year basis and are due by January 15<sup>th</sup> each year. Individuals newly joining after September 1<sup>st</sup> will have dues applied to the following year.