



AMA CLUB Group Enrollment Form

ORGANIZATION NAME

AMA CHARTER #

Club Members

PRESIDENT		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
SECRETARY		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
REFEREE/ROAD CAPTAIN		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
RISK MANAGEMENT OFFICER (RMO)		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
CLUB MEMBER 5		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			

Additional Club Members

Must have at least 5 members for a social charter and at least 10 members for a club promoting charter.

Additional members can be listed on an additional sheet.

6 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
8 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
9 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			

Continued on next page.

Additional Club Members

Must have at least 5 members for a social charter and at least 10 members for a club promoting charter.
 Additional members can be listed on an additional sheet.

10 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
11 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
12 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
13 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
14 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
15 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
16 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
17 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
18 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			

Additional Club Members

Must have at least 5 members for a social charter and at least 10 members for a club promoting charter.
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19 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
20 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
21 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
22 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
23 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
24 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			
25 - CLUB MEMBER		PHONE	EMAIL		
ADDRESS	CITY	STATE	ZIP CODE	BIRTHDATE	
AMA #		EXP.			

Payment Information

Cash Check Credit Card Select One: Visa Master Card Discover American Express

CREDIT CARD NUMBER	EXPIRATION DATE
CARDHOLDER NAME (AS IT APPEARS ON CARD)	CARDHOLDER'S SIGNATURE (REQUIRED)

Mail Form & Payment To American Motorcyclist Association | ATTN Organizer Services | 13515 Yarmouth Drive Pickerington, OH 43147
Email clubs@ama-cycle.org | **Phone** (614) 856-1900 | **Fax** (614)856-1921 | **AmericanMotorcyclist.com**