

## Person submitting this application

Name			
Address			
City	State	Zip	
Telephone	Email		
Relationship to applicant			
Applicant information			
Full name			
Nickname (if applicable)			
Current address			
City	State	Zip	
Phone	Email		
Birth date	Date of death (if applicable)		
AMA number Hometown and state (if different from current)			
Non-competition categories  ☐ Ambassador/Industry ☐ Design/Engineering  Competition categories	☐ Leadership/Motorcycle Rights Adv		
☐ Dirt Track ☐ Motocross/Supercross ☐ Off-	Road   Roadracing   Specialty	Competition	
The applicant has achieved prominence	•		
□ Local □ Regional □ National □ Internat	ional 🗖 World		
National Championships titles and	National Championship event		
International Championship titles and		-	
World Championships titles and	World Championship event win	ns	
Please provide with this submission form  1. A short biography describing the applicant's role in American motorcycling.  2. An original or equal-quality photograph of the application of the application of the application. Support materials and copies of media coverage in the application of the application.	n his or her field of expertise and the sp licant that clearly shows his or her face	3.	

## Mail application form to:

AMA Motorcycle Hall of Fame Motorcycle Hall of Fame Applications 13515 Yarmouth Drive Pickerington, OH 43147

Or email: nomination@motorcyclemuseum.org

Applications must be received by Dec. 31 of each year to be included in for the following year's ballot.
Submissions become the property of the American Motorcycle Heritage Foundation.

Date:

PHONE (614) 856-1900 • FAX (614) 856-1920 • NOMINATION@MOTORCYCLEMUSEUM.ORG • MOTORCYCLEMUSEUM.ORG

Signed: