

Finger Lakes BMW Club Membership Form

Primary Name

Please Print!

Address 1

Address 2

City/State/Zip

, NY (Zip+Four:)

Residence Phone #

If Unlisted (Include area codes)

Cell Phone #

If Emergency Only

Email Address

Date of Birth

I am willing to work at our rally!

My BMW is a

Year: _____ Model: _____ (Required for Primary)

Membership Numbers
if you belong

BMWMOA: _____ BMWRA: _____
BMWVintage: _____ AMA: _____

Newsletter:

I prefer a PRINTED newsletter via US Mail rather than electronic PDF

Associate Name

Cell Phone #

If Emergency Only

Email Address

Date of Birth

I am willing to work at our rally!

My BMW is a

Year: _____ Model: _____ (Optional for Associate)

Membership Numbers
if you belong

BMWMOA: _____ BMWRA: _____
BMWVintage: _____ AMA: _____

Children

List any children under the driving age (name/birthdate) who care to participate

Number of

Club Pins: _____ (Primary/Associate only - 1 per person, max 2)

I/we, the undersigned, certify that I/we own and operate a BMW motorcycle(s) and live within the area of New York State defined on the map, and generally, west of Interstate 81 and south of Pulaski.

Signatures

Primary member: _____

Associate member: _____

The Annual Membership Fee is **\$15.00** for member *and* any associate. Associates are defined as a spouse or significant other who lives at the same address. Call it the "family plan." The associate member does not need to be a BMW owner. Valid email address required for electronic PDF newsletter. Make your check payable to Finger Lakes BMW Club and mail your form and check to:

Finger Lakes BMW Club
P O Box 35
Webster, NY 14580-0035

Today's Date is: _____