



One Event/Weekend Membership Form

This membership may not be renewed for 13 months from the date of original purchase.

Event Name:	Event Date:
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Name:		Roadrace Transponder #
Permanent Address:		
City:	State / Province:	ZIP / Postal Code:
Country:	Cell Phone:	Date of Birth*:
Daytime Phone:	Emergency Phone:	Email:

*21 years or younger must provide proof of age - driver's license, birth certificate, or school identification with DoB

One Event/Weekend Membership Fee: \$30.00

This membership may not be renewed for 13 months from the date of original purchase.

One Event/Weekend Membership is not entitled to series points, voting rights or the issuance of *AHRMA Mag*.

One Event/Weekend Membership can be upgraded to a full competition membership or an associate (non-racing) membership by contacting the membership office and paying the additional fees due, see form below.

No back issues of *AHRMA Mag* will be sent if converted to an annual membership.

The Details Competition Preferences for New Members Only

- Race number preference (for all disciplines - list three or more - your permanent number will be on your membership card when received): #1 _____ #2 _____ #3 _____ If assigned a number on race day, it will not be your permanent number.
- Roadrace: Before AHRMA issues a racing number, you must provide proof that within the past two years you have:
 - 1) Competed with another roadracing organization;
 - 2) Successfully completed a roadracing school;
 - 3) Provide a copy of roadrace license or school certificate.
- Dirt Track
- Motocross: Vintage Post Vintage Next Gen *MX skill level: Intermediate Expert
- Cross Country: *CC skill level: Intermediate Expert
- Trials: *Trials skill level: Intermediate Expert Master

*A Novice category is available in MX, CC & Trials, as well a beginner category for Trials. New AHRMA members must ride as Intermediate or Expert until skill-level status is confirmed, optimally at your first event. At that time, you may be reclassified.

Payment

- Enclosed is a check or money order for \$ _____ # _____
- Please charge my MC/Visa/Disc/AmEx: Card# _____ Expires _____ CVV Code _____
Must include street number and ZIP code for credit card billing address. If different than address above, please provide billing address.
- Benevolent Fund donation \$ _____ or Individual donation to AHRMA \$ _____

By applying for and accepting membership in AHRMA, I agree to abide by all rules of the AHRMA Handbook, as well as any event or track rules that may apply.

Signature (must be signed to be valid and processed) _____ Date _____

Want to Race More??

Be quick, upgrade to Full Membership for only \$45

This offer expires 30 days after the weekend membership was issued, so don't delay!

Not sure about racing but want to support AHRMA? Upgrade to a non-racing Associate Membership for an additional \$10.

Yes! Upgrade me to a Full Membership

- Use my payment information above to upgrade my membership, \$45 will be added to the above credit card.
- Enclosed is a check or money order for \$ _____ # _____
- Please charge my MC/Visa/Disc/AmEx: Card# _____ Expires _____ CVV Code _____
Must include street number and ZIP code for credit card billing address. If different than address above, please provide billing address.

By applying for or renewing and accepting membership in AHRMA, I agree to abide by all rules of the AHRMA Handbook, as well as any event or track rules that may apply.

Signature (must be signed to be valid and processed) _____ Date _____

Mail with payment to:

AHRMA Membership Office: 5765 Walnut Rd., Macclenny, FL 32063

Fax: 904.485.8075 (payment by MC / Visa / Disc / AmEx)

Scan & email: elli.klein@ahrma.org

For more information:

Phone: 321.277.4985

Email: elli.klein@ahrma.org

www.ahrma.org REV 2/6/19