



Cruiser Club U.S.A.
Blue Ridge Chapter 26
Lynchburg, VA
Membership Application
Ride to Enjoy, Enjoy to Ride

Type of Membership: Single \$30.00 _____ Team Membership \$45.00 _____

Member Information

Date of Application: _____

1. Last Name: _____ First Name: _____ M.I.: _____

DOB: _____

Last Name: _____ First Name: _____ M.I.: _____

DOB: _____

2. Mailing Address: _____

3. Phone Number: _____

4. E-Mail: _____

Motorcycle(s) Presently Owned: _____

By filling out this application and submitting it, I attest that I will to the best of my ability uphold the principles and ideals set forth in the National by-laws of the Cruiser Club USA. I further agree to operate a motorcycle or any other vehicle at an event associated with this organization, only with a valid driver's license and current insurance coverage on that motorcycle or vehicle. With the acceptance of membership into the Cruiser Club USA and / or through participating in any manner with this organization, I agree not to hold the Cruiser Club USA, any of it's members, officers or any sponsor of the Cruiser Club USA, liable for my personal safety, the safety of my guest or the safety of any property in my possession. I agree to enter any activities of the Cruiser Club USA on a voluntary basis. All dues are due by March 1st. of each year for full members. Single membership \$30.00 Team membership \$45.00. funds should be made out to Cruiser Club USA Chapter 26.

Mail to Danny Heath P.O. Box 874 Forest VA. 24451

Applicants Signature: _____

Applicants Signature: _____