Wolverine Chapter of the

The Antique Motorcycle Club of America

Membership Application

Primary Member Associate Member

First Name:_____ _____

Last Name:_____ _____

Mailing Address:_____

City, State, Zip Code:_____

Email Address:_____

Home Phone: _____ Cell Phone:_____

National AMCA Member #: _____ Are You A Military Vet: ____

Would you like to serve on a committee? _____

Do you own an antique motorcycle? (35 Yrs. Old) _____

Membership Information

Member Type	Annual Dues
Primary	$20.00
Family (2 People)	$30.00

Pay the Chapter Secretary by Cash or Check

Make the Check out to: Wolverine Chapter of the AMCA

If Mailing Dues, Mail to: Wolverine AMCA
1016 Cohasset Lane
Kalamazoo, MI 49008

RB 12-23