

BMW Touring Club of Detroit

Membership Application/Membership Renewal Form

Please print, fill out and mail this form to the P.O. Box listed below.

Name: _____

Spouse/co-member Name: _____

Street address: _____

City: _____ State: _____ Zip/mail code: _____

Country (if not US): _____

Phone #: _____ Email address*: _____

* An e-mail address required for to receive the Club's monthly newsletter.

If you are a member of the American Motorcyclist Association (AMA), the BMW Motorcycle Owners of America (MOA) and/or the BMW Riders Association (RA), please indicate your membership number(s) here:

AMA: _____ MOA: _____

RA: _____

What motorcycle(s) do you own? (Year, make & model): _____

_____

Annual BMW TCD membership dues are $25.00. Membership periods now run 12 months from the date of your payment. Please allow two (2) to (4) weeks for processing.

Please make your check payable to 'BMW TCD' and mail it and this form to:

BMW Touring Club of Detroit
P.O. Box 2653
Southfield, MI 48037-2653