

BMW Riders of Chattanooga Membership Application

Year _____

Name _____

Spouse (if applying for associate membership) _____

Address _____ City _____ State ____ Zip _____

Birth date _____

Primary phone _____ ()* Alternate phone _____ ()*

* Please indicate "H" for Home "W" for Work or "C" for Cell

E-mail address _____

Year & model of Your BMW(s) _____

Membership in other motorcycle organizations (Please include membership number)

BMW MOA _____ BMW RA _____ AMA _____

Dues:

_____ Regular Member - \$20 Annually _____ Associate Member - \$5 Annually

Check _____ Cash _____ Date Paid _____

Release and Indemnity Agreement

You have voluntarily joined the BMW Riders of Chattanooga (hereafter referred to as the Club). On various occasions, the Club will sponsor road riding events. This does not indicate that the facilities or course have been inspected or approved by the Club, nor does it indicate that Club members or officers have been trained or accredited by the Club, nor does it indicate that your safety has been warranted by any Club authority.

To some extent, all motor vehicles are inherently dangerous. You should take part in any of the Club events based on your own assessment of your abilities. Club events may traverse public highways and the Club is not responsible for their condition or the actions of other individuals using the public highways.

The Club urges you to wear a helmet and other appropriate safety apparel. The Club also urges you to receive professional instruction before operating a motorcycle and to carry proper insurance coverage.

The Club does not provide medical insurance. The Club urges you not to operate a motorcycle without personal medical coverage.

If you have any doubts at this time about your personal ability to participate in Club events, if you have not adequately prepared yourself and your equipment, if you question the condition and safety of local public highways, or if you believe your personal insurance coverage is not adequate to compensate you for any loss that might occur, we urge you to notify the Club officers who will immediately refund your membership fee.

By signing this document, the undersigned Club member hereby agrees to reimburse all costs to those persons or organizations connected to Club events for damages incurred as a result of negligence on the part of the undersigned Club member.

Executed the _____ day of _____, _____ (Year)

Club Member's Signature _____

Club Member's Name Printed: _____

Spouse's Signature: _____

Spouse's Name Printed: _____

Fill out and mail to:

Kathleen Payne / BMW Riders of Chattanooga
225 County Road 185
Athens, TN 37303

Please complete survey in order to help the club better serve the needs of its members.

Please indicate your level of interest in each of the following activities:

On a scale of 0 to 5:

0 = No interest

5 = Enthusiastic interest

1-4 = somewhere in between (1= low interest, 4= high interest)

- _____ Rallies and weekend camping trips
- _____ Hands-on motorcycle maintenance and modifications
- _____ Training to improve rider proficiency
- _____ Guest speakers
- _____ Motorcycle-related movies
- _____ Overnight (motels) trips within Tennessee and the contiguous states
- _____ Dual-sport, dirt and trail rides
- _____ Half and all day twisty road sport rides
- _____ Track days and weekends
- _____ Two-up touring (couples)
- _____ Mid-week dinner rides
- _____ Mid-week day rides
- _____ Preferable day for week-end rides: Saturday _____ Sunday _____ either _____
- _____ Other rides and activities (please be specific) _____

Other comments/requests: _____
