



*****MEMBERSHIP APPLICATION*****

Please mail your completed application and cheque to: F.V.D.R.A. PO Box 32115 Langley, BC, V1M 2M3

Or

Attend our monthly meetings at: Ricky's Restaurant 8720 204th Street Langley, BC (Meetings held first Tuesday of every month)

Name: _____ Birth Date: ____/____/____ (Last) (First) (Mo) (Day) (Year)

Family Members Adult (19 +): _____ Birth Date: ____/____/____ (Mo) (Day) (Year)

: _____ Birth Date: ____/____/____ (Mo) (Day) (Year)

Family Members Children : _____ Birth Date: ____/____/____ (Mo) (Day) (Year)

: _____ Birth Date: ____/____/____ (Mo) (Day) (Year)

: _____ Birth Date: ____/____/____ (Mo) (Day) (Year)

Address: _____ City: _____ Postal Code: _____

Hm. Phone: _____ Cellular: _____ E-Mail: _____

Forum user name (choose a user name) _____

Occupation/ Business: _____ Any specialized skills or experience you could offer to the club: _____

Are you available to volunteer (specify activity & time) _____

Motorcycle make: _____ Model: _____ Year: _____

MEDICAL INFORMATION

(Use back of form if necessary)

Allergies: _____ Medications: _____

Family Doctor: _____ Phone #: _____

Care card number: _____ Other: _____

Membership fees per calendar year: Single: \$20.00 Family: \$30.00 Paid: _____

I, the undersigned, by applying for membership to the Fraser Valley Dirt Riders Association, agree to abide by the constitution and by-laws of said association and recognize the club objective: to improve and enhance the image and sport of off-road motorcycling.

Signature: _____ Date: _____

Signature of parent or guardian (if under age 19): _____