POST ENDURO ASSOCIATION APPLICATION FOR MEMBERSHIP

DATE
NAME
BIRTHDATE
SPOUSE
BIRTHDATE
CHILDREN AND AGES
ADDRESS
CITY/STATE/ZIP
OCCUPATION/EMPLOYER
EMAIL
PHONES
SPOUSE EMAIL
PHONES

DESCRIBE YOUR EXPERIENCE WITH OFF-ROAD MOTORCYCLE RIDING/RACING, ETC.
HAVE YOU PARTICIPATED IN COMPETITIVE RIDING EVENTS?
ARE YOU A MEMBER OF ANY OTHER OFF-ROAD CLUBS?
WHY DO YOU WANT TO BE A MEMBER OF THE PEA?
LIST THREE SPONSORS IN THE CLUB
DO YOU WANT A CAMPSITE?(YES/NO)

CAMPSITE REQUIREMENTS WILL BE EXPLAINED BY THE SPONSOR AND CO-SPONSOR.
WHERE (WHAT POSITION OR IN WHAT CAPACITY) ARE YOU WILLING TO SERVE DURING THE RACE THIS UPCOMING YEAR? ARE YOU ON A TEAM YET?
BY SIGNING THIS APPLICATION, YOU AGREE TO PARTICIPATE IN CLUB EVENTS AND THE RACE DURING THE YEAR. I REALIZE MY MEMBERSHIP IS CONTINGENT UPON MY WILLINGNESS TO DO SO
I AM ALSO AWARE THAT MY DUES ARE DUE ON DECEMBER 1 EACH YEAR AND IF MY PAYMENT IS LATE IT, IT COULD RESULT IN MY MEMBERSHIP BEING REVOKED
MEMBER
MEMBER
DATE