

2018
Oregon Oldtimer's
Club Membership Application

~~~~~ Please **CLEARLY** print information. ~~~~~

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Spouse (or significant other): \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Email address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Bike Brand: \_\_\_\_\_ Riding #: \_\_\_\_\_

**Membership: Please mark one**

**Associate Member (\$25 annually – expires 12/31/18):**  
 Associate membership dues allow participation in club events and Int'l race events  
 Includes family members under age 30 that ride "Support class" at Oregon Race only  
 80+ and 90+ Riders are FREE!! Please just send in the form and come Race!

**Class:**  
**(Please circle one)**

**Proof of age may be required.**

To participate in the +30 age class you *MUST BE* at least 30 years old by the date of the event you wish to ride. *NO EXCEPTIONS.*  
 All other age classes, your birthday must fall within the calendar year of the age class you wish to participate in.

| <u>+40</u>   | <u>+50</u>   | <u>+60</u>   | <u>+70</u>   | <u>+75</u> | <u>+80</u> | <u>+90</u> | <u>+30</u>   |
|--------------|--------------|--------------|--------------|------------|------------|------------|--------------|
| Master       | Master       | Master       | Master       | one class  | one class  | one class  | Expert       |
| Expert       | Expert       | Expert       | Expert       |            |            |            | Intermediate |
| Intermediate | Intermediate | Intermediate | Intermediate |            |            |            | Amateur      |
| Novice       | Novice       | Novice       | Novice       |            |            |            |              |

Legal Release:

I, the undersigned, fully understand that at no time will I make a legal or financial claim against, nor will hold responsible, any member of The Oldtimer's Motorcycle Association of Oregon, LLC, for any damages to my motorcycle, equipment, or my body, including death. I am, and will be accountable for my own actions. I have read and fully understand the above legal release.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Checks are made payable to:  
 "Oldtimers Motorcycle Assoc of Oregon"  
 Please mail to:  
 Oregon Oldtimers – 3647 NW Pacific Rim Dr. – Camas, WA 98607