



Marshfield T and T Riders, Inc.  
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Marshfield, WI 54449

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## Road Membership

NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ CEL \_\_\_\_\_

Email \_\_\_\_\_

AMA# \_\_\_\_\_ DIST 16 Y \_\_\_\_\_ N \_\_\_\_\_

EMERGENCY CONTACT \_\_\_\_\_

EMERGENCY CONTACT NUMBER \_\_\_\_\_

BIKE #1 \_\_\_\_\_ CURRENT MILEAGE \_\_\_\_\_

BIKE #2 \_\_\_\_\_ CURRENT MILEAGE \_\_\_\_\_

SPOUSE \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ AMA#(IF MEMBER) \_\_\_\_\_