



# TEXAS MOTORCYCLE ROADRIDERS ASSOCIATION



Application for Club Charter      or       Renewal of Club Charter # \_\_\_\_\_

Please attach your club's check for \$25.00 and mail the completed for  
to: TMRA, PO Box 178, Comanche, Texas 76442

NAME OF CLUB \_\_\_\_\_

ADDRESS \_\_\_\_\_

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

CONTACT \_\_\_\_\_ PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

### CLUB OFFICERS

President \_\_\_\_\_ TMRA # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Vice-President \_\_\_\_\_ TMRA # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Secretary \_\_\_\_\_ TMRA # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Meeting Information: Day \_\_\_\_\_ Time \_\_\_\_\_ and location of meetings \_\_\_\_\_

Club's fiscal year is from \_\_\_\_\_ to \_\_\_\_\_

Description of meetings \_\_\_\_\_

Election of officers is held \_\_\_\_\_

Other regularly scheduled activities \_\_\_\_\_

Please list 6 of your members or 50% of your membership (whichever is less)

That are ACTIVE TMRA members

|    | Name  | TMRA # | Exp. Date |
|----|-------|--------|-----------|
| 1. | _____ | _____  | _____     |
| 2. | _____ | _____  | _____     |
| 3. | _____ | _____  | _____     |
| 4. | _____ | _____  | _____     |
| 5. | _____ | _____  | _____     |
| 6. | _____ | _____  | _____     |

**TOTAL MEMBERS IN YOUR CLUB/CHAPTER** \_\_\_\_\_

Failure to provide required information will result in delays in processing your request!!

Area Vice President Signature (New Clubs Only) \_\_\_\_\_