



Star Touring & Riding Association
Chapter #193 – Woodstock II

2010 CHAPTER #193 MEMBERSHIP APPLICATION

Primary Member Name: _____ Birthday: (mm/dd/yy) _____
Secondary Member Name: _____ Birthday: (mm/dd/yy) _____
Children/Grandchildren: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Number(s): _____
E-Mail Address(es): _____

--- IMPORTANT---

Must be a member of Star Touring & Riding (applied for separately), prior to Chapter membership.

*Star Membership Number: _____ Exp. Date: _____
*Mandatory requirement.

Motorcycle(s) Make, Model and Year: _____

Years Riding Experience: _____

I am interested in joining (please check box):

Star Vets Tin Star LOS (Ladies of the Star) Star Kids

EMERGENCY CONTACT INFORMATION

Name: _____ Relationship: _____
Phone: _____ Alt. Phone: _____

Annual Membership fee: **\$25.00** per family
Remit to: Chapter Treasurer
(Note: Make checks payable to: **Star Touring & Riding Chapter #193**)

Primary
Member Signature: _____ Date: _____