



2010 PROMOTING CLUB CHARTER APPLICATION

(Eligible to sanction AMA/ATVA events and vote for AMA/ATV Congress Delegates)



CHARTERING REQUIREMENTS

- Payment must accompany charter application
- President is required to sign below
- New clubs or clubs that have not renewed charter for two or more years must submit a copy of their Constitution/By-Laws and two letters of recommendation printed on recommender's company letterhead stationery.
- Charter Application is required annually.
- All Club Officers including Contact Person are required to maintain current AMA/ATVA membership.
- 10 club members are required to be current AMA/ATVA members. **IMPORTANT:** Please complete side/page 2.

Club/Chapter Name: _____

Address _____ **City** _____ **State** _____ **Zip** _____

E-mail Address _____ **2nd E-mail** _____

Phone _____ **2nd Phone** _____

Web Address _____ **Fax** _____

(ALL MAIL IS SENT TO ABOVE ADDRESS AND IT WILL BE PUBLISHED ON AMA/ATVA WEBSITES)

Contact Person _____ AMA/ATVA # _____ Phone _____

Address _____ City _____ State _____ Zip _____

Club Legislative Officer _____ AMA/ATVA # _____ Phone _____

Address _____ City _____ State _____ Zip _____

President _____ AMA/ATVA # _____ Phone _____

Address _____ City _____ State _____ Zip _____

Secretary _____ AMA/ATVA # _____ Phone _____

Address _____ City _____ State _____ Zip _____





Referee _____ AMA/ATVA # _____ Phone _____

Address _____ City _____ State _____ Zip _____

Risk Management Officer (RMO) _____ AMA/ATVA # _____ Phone _____

Address _____ City _____ State _____ Zip _____

Did an officer view the Risk Management Workshop on-line? Yes No
 (Available at www.AMAdirectlink.com/organizers/resources/IRMW/index.asp)

<p>Please Check One (Eligible to Sanction AMA Competition and Recreation Events)</p> <p><input type="checkbox"/> New AMA Charter</p> <p><input type="checkbox"/> Renewing AMA Charter # _____</p> <p>Please select your AMA Congress Division (Select one only):</p> <p><input type="checkbox"/> Competition</p> <p><input type="checkbox"/> Road and Off-Road Recreation Riding</p>	<p>Please Indicate Your Club's Main Interest</p> <p><input type="checkbox"/> ATVs and Motorcycles</p> <p><input type="checkbox"/> Motorcycles Only</p> <p><input type="checkbox"/> ATVs Only</p> <p>\$75 fee is required with application</p> <p>If you wish to pay by credit card, please supply information below:</p> <p>(Circle which type of credit card)    </p> <p>_____</p> <p>Credit Card # _____ Expiration _____</p>
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THE CLUB PRESIDENT MUST READ AND SIGN BELOW.

Charter agreement: The club/chapter hereby applies for a club charter with the American Motorcyclist Association/All-Terrain Vehicle Association and encloses the necessary papers and fee for one calendar year. The club/chapter agrees that a club charter will be valid or may be renewed only so long as their motorcycling/ATV activities are within AMA/ATVA Guidelines and in furtherance of AMA/ATVA objectives. The undersigned applicant will reimburse the AMA for all costs, damages and other losses the AMA or its district organizations suffer as a result of the undersigned's negligent activities as an AMA promoting club.

Additionally, the undersigned applicant agrees that its motorcycling/ATV activities will comply with AMA/ATVA Rules and Guidelines, they will further AMA/ATVA objectives, and that their club charter will be valid or may be renewed only if their motorcycling/ATV activities are in compliance with the above.

PRESIDENT: _____ DATE: _____

Club Name _____ **AMA Charter #** _____

Please list ADDITIONAL club members below (Must total 10 members when combined with those on Page 1):

- 1) AMA/ATVA # _____ Name: _____ City: _____ St: _____ Zip: _____
- 2) AMA/ATVA # _____ Name: _____ City: _____ St: _____ Zip: _____
- 3) AMA/ATVA # _____ Name: _____ City: _____ St: _____ Zip: _____
- 4) AMA/ATVA # _____ Name: _____ City: _____ St: _____ Zip: _____
- 5) AMA/ATVA # _____ Name: _____ City: _____ St: _____ Zip: _____
- 6) AMA/ATVA # _____ Name: _____ City: _____ St: _____ Zip: _____
- 7) AMA/ATVA # _____ Name: _____ City: _____ St: _____ Zip: _____
- 8) AMA/ATVA # _____ Name: _____ City: _____ St: _____ Zip: _____
- 9) AMA/ATVA # _____ Name: _____ City: _____ St: _____ Zip: _____
- 10) AMA/ATVA # _____ Name: _____ City: _____ St: _____ Zip: _____
- 11) AMA/ATVA # _____ Name: _____ City: _____ St: _____ Zip: _____
- 12) AMA/ATVA # _____ Name: _____ City: _____ St: _____ Zip: _____
- 13) AMA/ATVA # _____ Name: _____ City: _____ St: _____ Zip: _____
- 14) AMA/ATVA # _____ Name: _____ City: _____ St: _____ Zip: _____

Is your club a member of your district organization? <input type="checkbox"/> yes <input type="checkbox"/> no Is your club incorporated? <input type="checkbox"/> yes <input type="checkbox"/> no
What year was your club organized? _____
If your club donates to charitable organizations, what amount did you donate during 2009? _____
Were you recruited by an AMA Field Rep? If so, what is their AMA Field Rep #? _____