



VJMC MEMBERSHIP APPLICATION FORM

PLEASE PRINT WITH CAPITAL LETTERS

FIRST NAME: _____

LAST NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____

ZIP / POSTAL CODE: _____ COUNTRY: _____

EMAIL: _____ PHONE: _____

(THE INFORMATION ABOVE WILL ONLY BE USED FOR OUR CLUB BUSINESS AND MAGAZINE MAILINGS)

DUES: (CIRCLE ONE) ALL PAYABLE IN US \$

FOR USA & CANADA: \$30 ONE YEAR / \$55 TWO YEARS / \$80 THREE YEARS

FOR ALL OTHER COUNTRIES: \$50 PER YEAR (INCLUDES AIRMAIL POSTAGE)

PAYMENT AMOUNT: \$ _____ CREDIT CARD # (LAST 4 DIGITS) _____

CIRCLE ONE: CASH / CHECK / VISA / MASTERCARD / AMERICAN EXPRESS

PLEASE INDICATE HOW YOU LEARNED ABOUT THE VINTAGE JAPANESE MOTORCYCLE CLUB OF NORTH AMERICA, INC. (CHECK ONE OR MORE CHOICES BELOW.)

TALKED TO A VJMC MEMBER _____

TALKED TO A VJMC FIELD REPRESENTATIVE _____

SAW THE VJMC WEBSITE (VIA SEARCH OR OTHERWISE)

SAW VJMC AT AN EVENT _____

SAW A COPY OF THE MAGAZINE _____

----- CUT OFF AND GIVE BELOW SECTION AS RECEIPT -----

WELCOME TO THE VINTAGE JAPANESE MOTORCYCLE CLUB!

YOUR YEARLY MEMBERSHIP ENTITLES YOU TO RECEIVE 6 ISSUES OF OUR BI-MONTHLY VJMC MAGAZINE: DEC/JAN, FEB/MAR, APR/MAY, JUNE/JULY, AUG/SEPT, OCT/NOV

OFFICIAL RECEIPT FOR VJMC MEMBERSHIP PAYMENT. PLEASE KEEP FOR YOUR RECORDS.

PAID \$ _____ DATE _____ RECEIVED BY _____

FOR INQUIRIES, CONTACT VJMC MEMBERSHIP SERVICES: 763.420.7829 / VJMC@CORNERSTONEREG.COM

VJMC c/o Cornerstone Registration, P.O. Box 1715, Maple Grove, MN 55311-6715