Northern Indiana Cruisers Motor Club
454 West 400 North Valparaiso, IN 46385
www.rrides.com northernindianacruisers@gmai.com

MEMBERSHIP APPLICATION

DATE APPLIED:_____

NAME: _____ SPOUSE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

EMAIL: _____

BIRTH MONTH & DAY ___/___. MEMBERSHIP YEAR _____ NEW ☐ RENEWAL ☐

FEE: $25 PER COUPLE

NOTE: ALL MEMBERSHIPS EXPIRE 1/31 EACH YEAR

HOW DID YOU HEAR ABOUT R-RIDES? _____

SIGNATURE: _____ DATE: _____

VEHICLES OWNED

YEAR _____ MAKE _____ MODEL _____

YEAR _____ MAKE _____ MODEL _____

YEAR _____ MAKE _____ MODEL _____

YEAR _____ MAKE _____ MODEL _____

MAKE CHECKS PAYABLE TO: R-RIDES NORTHERN INDIANA CRUISERS

PLEASE MAIL APPLICATION TO:
SUSAN GRIFFITH-SECRETARY
504 LINCOLN ST
PORTER, IN 46304

CLUB OFFICERS USE ONLY:

CHECK ☐ CASH ☐

CK NO_____

AMOUNT: _____. DATE: _____