

The Georgia Sidecar Club

Sidecarists and Solo Bikers Welcome

Membership Application

| Name: | | | | | |
|---------------|-------------------|------------------|----------|------------|--|
| | | | | | |
| | | | | | |
| Zip Code: | | Email Address: _ | | | |
| Home Phone | : | Work Phone: | | | |
| Significant O | ther: | | | | |
| Children: | | | | | |
| Motorcycle(s | s) | | | | |
| | Make | Model | | Year | |
| Sidecar(s) | | | | | |
| | Make | Model | | Year | |
| Where do yo | u like to ride? _ | | | | |
| Ride Dates P | referred : Satu | rday? Sunday? | Weekday? | Overnight? | |

Send check or money order to:
Georgia Sidecar Club
c/o Janice Rinaldo
2149 Cluster Lane
Grayson, Ga 30017`
Phone – 404-312-5290

Emaill: goingtodaytona@comcast.com