



M.E.R.A. Membership Application

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE: DAYS \_\_\_\_\_ EVENINGS \_\_\_\_\_

RIDING EXPERIENCE \_\_\_\_\_

RALLY EXPERIENCE \_\_\_\_\_

MOTORCYCLES CURRENTLY OWNED \_\_\_\_\_

Return this membership form, with your check for \$24.00, if you would like to be part of this unique organization.

Make checks payable to Steve Chalmers, and then mail everything to:

Steve Chalmers  
6623 W. Feulner Drive  
Salt Lake City, UT  
84128