

**Application for Membership
Yankee Chapter, Inc.
Antique Motorcycle Club of America**

Name _____

Address _____

City _____

State _____ Zip _____

AMCA # _____

(You must be a National AMCA member in good standing.)

Phone (_____) _____ - _____

Associate member's name _____

E-mail _____

_____ **\$10.00 – E-mailed *Chatter***, with color graphics

_____ **\$15.00 – USPS mailed *Chatter***, with black & white graphics

Please make your check payable to:

“YANKEE CHAPTER, Inc. ”

Mail to: Sandra Gallo
31 Atwoodville Lane
Mansfield Center, CT 06250

Requests for membership in the National AMCA should be sent to:

AMCA, C/O Cornerstone Registration, Ltd..
P.O. Box 1715
Maple Grove, MN 55311-6715