

Membership Application Form for Texas ABATE Confederation, Inc.

Membership Level (select one) Single \$20/year Couple \$30/year Individual Life Membership \$200

Renewal? Yes No If renewal, please provide the following:

Membership number _____ Membership expires (mm/yyyy) _____

Membership years (how long have you been a member) _____

Name 1 _____

Name 2 _____

Address _____

City _____ State _____ ZIP _____

County _____ Phone(s) _____

Email Address _____

Sponsor (optional) _____

Motorcycle Owner?: Yes No Registered Texas Voter?: Yes No

Chapter Preference: Arlington Denton Golden Triangle Texoma District 11
 North East Texas Independent member

Please fill in the form and mail with payment (check or money order) to:

Texas ABATE Membership, PO Box 1113 Sherman, Texas 75027

DO NOT SEND CASH THROUGH THE MAIL!