2008 – 2009 MEMBERSHIP RENEWAL FORM

Annual Renewal Date is July 1 of every year

It's Time to Renew Your Marne Riders Membership!

Please return this form with your renewal dues to:

Marne Riders Motorcycle Club c/o Dennis Noes
11649 Buckhead Trail
Bryceville, FL., 32009-2541

Date_____ **Membership # (If known)** _____

Name_____
Last **First** **MI**

Street / Unit_____

City/FOB _____ **(ST)** _____**(Zip/APO)**_____

Dues are $22 annually for Regular and Associate Members. $12.00 f your Marne Riders dues will be applied to your membership into the Society of the Third Infantry Division. **Note:** If you pay your Society dues via your Outpost or separately, then Marne Rider dues are $10.00.

- ❑ **Regular Membership**: membership in the Marne Riders Motorcycle Club is open to Veterans with honorable service in the Third Infantry Division and those who were members of supporting or attached units of the Third Infantry Division.
- ❑ **Associate Member**: other Armed Force Veterans, spouses, parents, children, siblings, of any persons eligible for regular membership, and other person with a special interest in, or an affinity for the Society of the Third Infantry.
- ❑ **Deployed Member: Active** Marne Rider Members currently deployed will have dues waived and will be renewed in the Marne Riders and the Society of the Third Infantry Division. However, member must let the Marne Riders know their Deployment status by filling out and returning this form via email to director@marnerider.com
  - **Expected timeframe that deployment ends:** _____
- ❑ **Gift Membership:** If you would like to provide a Gift membership, please download a regular membership application and follow the membership process.
- ❑ **Non-Renewal:** I do not wish to renew my membership at this time. Please let us know the reason why so we can make improvements by sending this completed form to director@marnerider.com. We hope you reconsider and return to the Marne Riders in the near future.

Signed: _____ **Date:** _____

Make checks payable to Marne Riders Motorcycle Club c/o Dennis Noes. Send your completed renewal application to address indicated above.

OFFICE USE ONLY:
Regular / Associate member: ____ Marne Rider Dues: ___ Society Dues: ___ Outpost Club Dues _____ Membership #_____Check #_____ Amount _____

RIDE SAFE AND ROCK OF THE MARNE!