

# MEMBERSHIP APPLICATION

## ORGANIZED CHAOS

Attach a copy of your driver's license and proof of insurance to this completed application.  
Return application to the membership committee. Fees/donations are directed to the treasurer.

Name (First, Nickname, Last)		Date of Birth (must be 21+)	
Address		Phone	
Email		Occupation	
How did you learn about Organized Chaos Chicago?		Were you referred by an existing OCC member? If yes, whom?	
What type of membership are you applying for? Additional Comments <input type="checkbox"/> Riding Member <input type="checkbox"/> Non-Riding Member			
Name of emergency contact and relationship		Phone number of contact	
Name of emergency contact and relationship		Phone number of contact	
Health Insurance Company		Any pertinent medical conditions or allergies	
Bike (Year, Make, Model)		Driver's License No. (Must have "M" Class Designation)	
Motorcycle Insurance Company, Policy Number, Expiration Date			
Signature			Date
Office Use Only			
Application Received Date	Insurance and License?	Prospect Start Date	Membership Start Date

# CHICAGO