

SMARTER

Membership Application Form (Please print clearly or type)

Name _____
First Middle Initial Last

Address _____ County _____

City _____ State _____ ZIP + 4 _____ - _____

Telephone (_____) _____ - _____ Extension _____; (_____) _____ - _____
Daytime Evening

Facsimile (_____) _____ - _____ Cellular telephone (_____) _____ - _____

Email _____ Personal Web URL _____

Contact information will remain confidential. May we use the above to send you alerts and releases? YES NO

Occupation _____ Interested in our volunteer activities? _____
Current or former if retired or semi-retired Yes/No

Motorcycling Interest/s (check all that apply) _____ Touring/Sport Touring _____ Off-Highway _____ Dual Sport
_____ Pro Racing _____ Amateur Competition _____ Collect/Restore _____ Non-motorcyclist safety advocate

Motorcycle organizations of which you are a member _____

Safety-advocacy organizations of which you are a member _____

Are you a certified MSF RiderCoach? YES NO If you are a certified instructor for any other rider-education courses, please identify _____

List all formal rider training completed (e.g., MSF Basic or Experienced Rider courses, MSF DirtBike School, California Superbike School, or Police Motor Officer Training) or check NONE if you have no formal training
_____ NONE _____

Please list any other skills or areas of expertise you would like us to know about _____

How did you hear about us? _____
Fellow motorcyclist? Web search? Press release? Email alert? Other?

Individual Membership: \$25 per year September 1 to August 31, or \$65 for 3 years; two persons of same household may join for \$35 per year or \$90 for 3 years (submit payment and completed applications together). Individual Life Membership is \$200.00 or Life Membership for two persons of same household for \$400.00. Applications received prior to May 1 expire on September 1 of same year. Applications received after May 1 expire September 1 of the following year. All memberships are renewable by September 1 to maintain uninterrupted membership status.

Organizational Membership: Nonprofit corporations, governmental units, traffic-safety associations or professional associations whose missions are compatible with *SMARTER*'s are eligible to apply for organizational membership. The *SMARTER* board will evaluate all organization applications and may reject any application based on the applying organization's incompatibility with *SMARTER* principles. To be accepted, an organization's membership must complement our mission of motorcyclist safety advocacy such that combining the resources of our respective organizations to advance a common goal would result.

Organizational memberships are \$100 per year September 1 to August 31. All memberships are renewable by September 1 to maintain uninterrupted membership status. Applicable fee must accompany completed organization application and will be returned if the application is rejected. Email inquiries to smarterusa@gmail.com prior to submitting an application are encouraged.

Supporting Membership: Support from all individuals or from for-profit corporations whose principles are compatible with the mission of *SMARTER* is encouraged. Various levels of support are available. Please contact *SMARTER* by sending an email message to smarterusa@gmail.com discuss with an officer your interest in a supporting membership.

Donation Dollars: Additional contributions of any amount beyond the requisite membership fee are gratefully accepted. No goods or services will be received in exchange for your contribution. *SMARTER* is a nonprofit, tax-exempt public charity under Section 501(c)(3) of the Internal Revenue Code. Your donation is tax deductible as allowed by law. Please allow 30 days for acknowledgement and receipt.

☐ I want to help. Also included is my contribution of \$_____, for a total amount enclosed of \$_____.

Follow the posted directions for emailing your application and paying dues via PayPal or mail your completed application form along with your check for the applicable membership fee, payable to *SMARTER*, Inc., to:

SMARTER
P.O. Box 80050
Stoneham, MA 02180

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For office use only

Date rec'd _____ Amt rec'd _____ Check No. _____ Dated _____
Member ID No. _____ Exp date _____ AccDb _____ Email _____ USPS _____