

DSRC CLUB MEMBERSHIP RENEWAL REQUEST

Name _____ **Date** _____

Address _____ **City** _____ **St** _____ **Zip** _____

Phone _____ **E-Mail** _____

AMA No. _____ **Date of Birth (Student or Jr.)** _____

_____ **Junior Membership** (Under age 19 as of 1 July.) Free
Note: You must first be a member of A.M.A., provide a copy of your A.M.A. Card, and state your date of birth, on this application. (A.M.A. has a reduced fee for Juniors of only \$1/yr without the magazine.)

_____ **Student Membership** (Full time student under age 25 with current Student ID. Card.) \$10/yr.
Note: You must first be a member of A.M.A. and provide a copy of your A.M.A. Card and Student I.D. Card with this application

_____ **Renewal Open Member** \$35/yr.
• Note: You must first be a member of A.M.A. and provide a copy of your A.M.A. Card with this application.

_____ **New Open Member** \$40/yr.
Note: You must first be a member of A.M.A. and provide a copy of your A.M.A. Card with this application.

Please return this form as soon as possible with your annual dues and proof of A.M.A. membership to:

Duluth Superior RC Club,
Attn: Bud Gorman,
PO Box 91
Knife River MN. 55609