



ABATE of Florida, Inc.
Southwest Chapter
 P.O. Box 60745 ▪ Fort Myers, FL 33906
 Southwest.abateflorida.com
MEMBERSHIP APPLICATION

Name (Please Print Legibly): _____

Mailing Address: _____

_____ City State Zip Code + Four

Phone: (Include Area Code): _____

May we use your phone number for our phone tree? YES _____ NO _____

Email Address: _____

Are you a registered Voter? YES _____ NO _____

Please list your voting districts from your Voter Registration Card:

_____ FL House _____ FL Senate _____ US Congress District

Name of Chapter you wish to join: **Southwest Chapter**

If you are a member of more than one chapter, please designate your home chapter _____

Select ONE of the following:

New/Renewal – Annual Membership Due \$20.00

Lifetime Membership \$600.00

Transfer Membership to: _____

Change of Address: _____

Signature: _____ Date: _____

Sponsored by Chapter Member: _____

Memberships are open to anyone 18 years of age or older. All members receive with their paid membership a membership card, our bi-monthly Masterlink magazine, Chapter Newsletter, Chapter voting privileges and personal involvement in Statewide legislative actions and their freedom to ride.

CHAPTER USE

Dues Paid by Cash Check Money Order

Mailed Date: Membership Card _____

Copy of By Laws _____

Membership Expiration _____

<p>Make Checks Payable to: ABATE Southwest Chapter</p>
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