

Alfa Roadrunners Membership Application Form

Name: _____

Spouse: _____

Current Address: _____

Phone Number: _____ E-Mail Address: _____

Coach Information: Motor home _____ 5th Wheel _____

Model _____ Length _____

Date Purchased _____ Vin # _____

Dealer _____

Annual Roadrunner dues are \$10 per year, payable in April of each year. If it is more convenient, multiple years can be paid.

Other Alfa Chapter Memberships _____

Amount Paid: \$ _____

Date: _____

Make check payable to: Alfa Roadrunners

Please note on check: Re: Roadrunner Dues

And send to:

Lorraine Lynch
514 Americas Way #3936,
Box Elder, SD 57719-7600

Thank You