

## Find a chapter near you

| Chapter                          | Location     |
|----------------------------------|--------------|
| Central Oregon                   | Redmond      |
| Douglas County                   | Winchester   |
| Hub City                         | Albany       |
| Jackson County                   | Medford      |
| Josephine County                 | Grants Pass  |
| Lincoln County                   | Newport      |
| Lower Columbia                   | Clatskanie   |
| North Coast                      | Astoria      |
| River City                       | The Dalles   |
| Southeast Portland               | Gresham      |
| Washington County                | Forest Grove |
| Indian Creek is members-at-large |              |

Meeting times and locations go to  
[www.abateoforegon.net/chapters](http://www.abateoforegon.net/chapters)



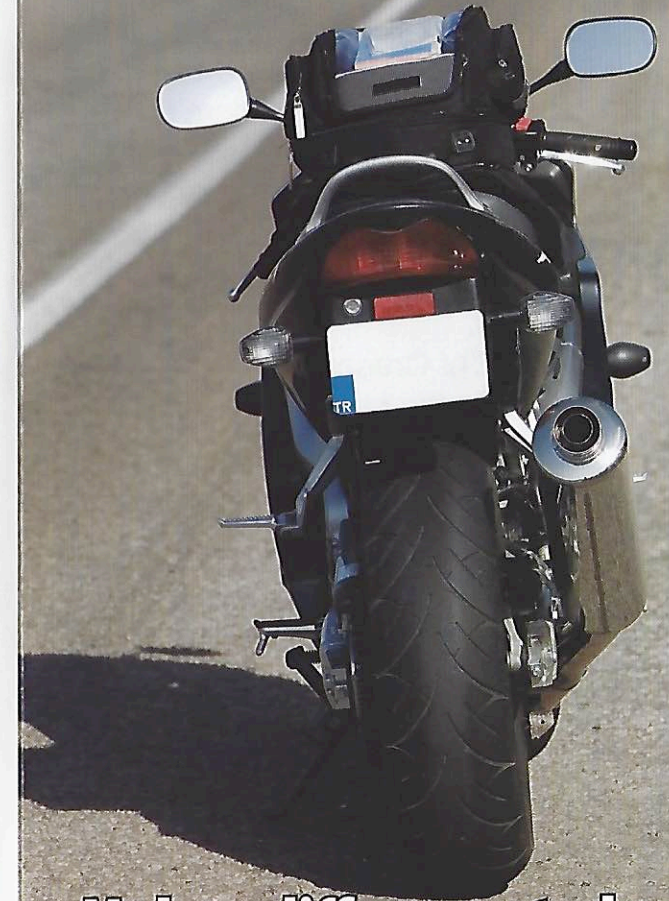
Making sure motorcyclists  
are seen and heard

ABATE. of Oregon  
PO Box 4504  
Portland OR 97208

ABATE of Oregon

# Do you know what's around the corner?

Advocating for motorcyclists



Make a difference today  
Together we have a voice



## Become a member and add your voice to the conversation

Our members are motorcycle enthusiasts from all walks of life who have come together to work for sensible legislation and to promote motorcycle safety, education, and public awareness. We fight hard to protect freedom of choice and freedom of the road.

### Membership includes

- ABATE of Oregon patch
- Membership card
- Monthly state newspaper
- Reimbursement for training
- Accidental Death Insurance
- Community involvement

Fine out more by visiting [www.abateoforegon.net](http://www.abateoforegon.net)

### ABATE of Oregon

A not-for-profit organization founded in 1975 is a legislative action organization and has been instrumental in affecting legislation concerning motorcycle riding in Oregon.



### Our mission

ABATE of Oregon promotes motorcycle awareness, education, safety, and liberty through community involvement and legislative action.

Send your completed application to:  
**State Membership Secretary**  
**ABATE of Oregon, Inc.**  
**P.O. Box 4504**  
**Portland, OR 97208**

## A.B.A.T.E. of Oregon, Inc. Membership

| MEMBERSHIP RATES   |  |                                |               |                  |   |                               |                                |  |                               |                                |  |                                |                                |   |                                |                                |
|--|--|--------------------------------|---------------|------------------|---|-------------------------------|--------------------------------|--|-------------------------------|--------------------------------|--|--------------------------------|--------------------------------|---|--------------------------------|--------------------------------|
| <input type="checkbox"/> New Membership                                    | <input type="checkbox"/> Current Member  |                                |               |                  |   |                               |                                |  |                               |                                |  |                                |                                |   |                                |                                |
| Membership # _____   |  |                                |               |                  |   |                               |                                |  |                               |                                |  |                                |                                |   |                                |                                |
| Chapter _____  |  |                                |               |                  |   |                               |                                |  |                               |                                |  |                                |                                |   |                                |                                |
|  | <table border="0"> <tr> <td><b>Single</b></td> <td><b>Family</b></td> <td><b>Associate</b></td> </tr> <tr> <td><b>1 Year</b> <input type="checkbox"/> \$30</td> <td><input type="checkbox"/> \$45</td> <td><input type="checkbox"/> \$100</td> </tr> <tr> <td><b>2 Years</b> <input type="checkbox"/> \$55</td> <td><input type="checkbox"/> \$80</td> <td><input type="checkbox"/> \$190</td> </tr> <tr> <td><b>3 Years</b> <input type="checkbox"/> \$80</td> <td><input type="checkbox"/> \$120</td> <td><input type="checkbox"/> \$280</td> </tr> <tr> <td><b>5 Years</b> <input type="checkbox"/> \$125</td> <td><input type="checkbox"/> \$200</td> <td><input type="checkbox"/> \$450</td> </tr> </table> | <b>Single</b>                  | <b>Family</b> | <b>Associate</b> | <b>1 Year</b> <input type="checkbox"/> \$30 | <input type="checkbox"/> \$45 | <input type="checkbox"/> \$100 | <b>2 Years</b> <input type="checkbox"/> \$55 | <input type="checkbox"/> \$80 | <input type="checkbox"/> \$190 | <b>3 Years</b> <input type="checkbox"/> \$80 | <input type="checkbox"/> \$120 | <input type="checkbox"/> \$280 | <b>5 Years</b> <input type="checkbox"/> \$125 | <input type="checkbox"/> \$200 | <input type="checkbox"/> \$450 |
| <b>Single</b>  | <b>Family</b>  | <b>Associate</b>               |               |                  |   |                               |                                |  |                               |                                |  |                                |                                |   |                                |                                |
| <b>1 Year</b> <input type="checkbox"/> \$30                                | <input type="checkbox"/> \$45  | <input type="checkbox"/> \$100 |               |                  |   |                               |                                |  |                               |                                |  |                                |                                |   |                                |                                |
| <b>2 Years</b> <input type="checkbox"/> \$55                               | <input type="checkbox"/> \$80  | <input type="checkbox"/> \$190 |               |                  |   |                               |                                |  |                               |                                |  |                                |                                |   |                                |                                |
| <b>3 Years</b> <input type="checkbox"/> \$80                               | <input type="checkbox"/> \$120   | <input type="checkbox"/> \$280 |               |                  |   |                               |                                |  |                               |                                |  |                                |                                |   |                                |                                |
| <b>5 Years</b> <input type="checkbox"/> \$125                              | <input type="checkbox"/> \$200   | <input type="checkbox"/> \$450 |               |                  |   |                               |                                |  |                               |                                |  |                                |                                |   |                                |                                |
| Family includes 2 people. Additional family members add \$5 each per year. |  |                                |               |                  |   |                               |                                |  |                               |                                |  |                                |                                |   |                                |                                |
| <input type="checkbox"/> <b>Sustaining:</b> \$100 or more per year         |  |                                |               |                  |   |                               |                                |  |                               |                                |  |                                |                                |   |                                |                                |
| <input type="checkbox"/> <b>Lifetime:</b> \$400 - Individuals only         |  |                                |               |                  |   |                               |                                |  |                               |                                |  |                                |                                |   |                                |                                |
| Total Members: _____   |  |                                |               |                  |   |                               |                                |  |                               |                                |  |                                |                                |   |                                |                                |
| Amount enclosed: \$ _____  |  |                                |               |                  |   |                               |                                |  |                               |                                |  |                                |                                |   |                                |                                |
| Donation to A.B.A.T.E.: \$ _____   |  |                                |               |                  |   |                               |                                |  |                               |                                |  |                                |                                |   |                                |                                |

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Family includes 2 people. Additional family members add \$5 each per year.

#### NOTES:

\* Single, Family, Sustaining & Life member benefits: Patch (first year), card, AD&D insurance for named members, discounted admission to ABATE of Oregon events, qualify for Team Oregon tuition reimbursement offers as may be set by the Board.

\*\* Associate member benefits: Certificate of Membership for group, Associate cards for each listed member, AD&D insurance for named members, discounted admission to ABATE of Oregon events.

Sustaining membership includes name printed on front page of ABATE newspaper.

All members can join a second chapter for an additional \$5 per year.