

ROADSIDE ASSISTANCE

Membership Number
AMW-

MOTOR CLUB REGISTRATION

Primary Member	Primary Home Phone	Business Phone	E-Mail	Address
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SAMPLE NOT FOR USE

Address	City	State	Zip Code
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Vehicle Info:	Year/Make	Model	VIN Number (Optional)	Odometer	Mileage
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Additional Family Members (up to six)	Phone Number	E-mail Address (optional)
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- 1. _____
- 2. **SAMPLE NOT FOR USE**
- 3. _____
- 4. _____
- 5. _____
- 6. _____

Membership Plan Price* \$ _____	Plan Effective Date _____ (MM/DD/YYYY)
*Membership Plan Price May be Paid on your behalf by agency.	Plan Term Months(s) _____

I/We have read this Membership document in its entirety and fully understand its content and acknowledge receipt of a copy thereof. I further understand that this Membership is not required in order to obtain insurance for my vehicle and that my acceptance of the benefits under this Membership is voluntary.

[THIS MEMBERSHIP INCLUDES A BINDING ARBITRATION AGREEMENT. I/We acknowledge that I/We have read and understand the binding arbitration provisions discussed in this contract. I/We understand this arbitration agreement requires that any dispute related to this contract be resolved by binding arbitration and not in a court of law, and I/We understand that the results of arbitration are final and binding. I/We further understand that, through my acceptance of this contract, I/We am/are surrendering my right to have any dispute between Auto Knight Motor Club Inc. and myself resolved in court and I/We am waiving my right to a trial by jury.]

I/We ACCEPT THIS MEMBERSHIP: PRINT NAME(S)
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SAMPLE NOT FOR USE

PRIMARY MEMBER SIGNATURE:	DATE:	CO-MEMBER SIGNATURE:	DATE:
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AGENCY NUMBER/NAME:	AGENT SIGNATURE *	DATE:
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SAMPLE NOT FOR USE

AGENT AGREES AND CERTIFIES THAT THE MEMBER, LISTED ABOVE, IS ELIGIBLE FOR THIS MEMBERSHIP PLAN.

Motor Club Plan Administered By:
Auto Knight Motor Club Inc.
43100 Cook Street, Suite 200
Palm Desert, CA 92211

If You need Emergency Roadside Assistance in the U.S., Canada or Mexico call:
1-855-379-5853 (Toll Free)