



Application for Membership

Date: _____
Name: _____
Address: _____
Phone: _____ Mobile: _____
Email: _____
Dept. Affiliation: _____
Chief Name & Phone: _____

Are you currently a member of any other motorcycle-oriented group or club? Yes No

If Yes, please indicate group or club: _____

Have you ever been a member of any other motorcycle-oriented group or club? Yes No

If Yes, please indicate group or club: _____

Please indicate other social clubs of which you are a current or former member: _____

All applications are held for 30 days before any action is taken.

Membership Type Requested: *Active Social Associate Honorary Junior*

Annual Dues are \$20.00, payable when application is approved. Active, Associate and Honorary applicants must show proof of a valid Class M license or Class M permit; Active and Honorary applicants must show proof of membership in a valid fire department or ambulance corps.

RKMC NY 40 Sponsor: _____

I, the undersigned, do hereby apply for membership in the Red Knights International Motorcycle Club, New York Chapter 40. I agree to abide by the bylaws of RKMC International, as well as the rules and regulations governing RKMC NY 40. I further understand that the decision of the Membership Committee and the voting membership of NY 40 is final and that if my application is rejected I may re-apply in 60 days.

Signature: _____ **Date:** _____

Membership Committee Use Only:

The above individual has provided the following documentation for membership:

Membership Dues Proof of Valid Class M license or permit
 Proof of current, retired, or life membership of a valid fire dept. Or EMT ambulance corps **OR** FD membership validated by Chief Officer

This application has been : *Approved* *Rejected* *Tabled*

Membership Committee Chair Signature: _____

Mail application to:

Red Knights Chapter 40
President
P.O. Box 508
Norwich, NY 13815