

# Red Knights Motorcycle Club

## PA Chapter 15 Membership Application

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

Type of Motorcycle \_\_\_\_\_ Plate# \_\_\_\_\_

Fire Service Affiliation \_\_\_\_\_

Date of Birth \_\_\_\_\_ Operator License no. \_\_\_\_\_

Fire Chief/Station O.I.C. \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

How did you learn about us? \_\_\_\_\_

I, the undersigned, do hereby apply for membership in the RED KNIGHTS INTERNATIONAL FIREFIGHTERS MOTORCYCLE CLUB, INC., PA. CHAPTER 15. I agree to abide the CONSTITUTION, BYLAWS AND RULES AND REGULATIONS that govern the membership.

Applicants Signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse/Relative/Friend Signature \_\_\_\_\_ Date \_\_\_\_\_

Application fee: TWENTY DOLLARS (\$20.00) One-time for all classifications

Annual dues: TWENTY DOLLARS (\$20.00) active & associate

Application fees and dues required upon request for membership.

Make check payable to: RED KNIGHT M.C. PA15

Membership Committee Recommends \_\_\_\_\_ Accept \_\_\_\_\_ Reject \_\_\_\_\_

Membership Committee Initials \_\_\_\_\_ Status \_\_\_\_\_

Please bring this application along with your application fee to our next meeting.

We meet the first Sunday of every month at various fire stations in the area. Check our Events Calendar for times and locations.