



Name _____ Date _____

Address _____ Apt# _____

City _____ NY Zip _____

Phone () _____ Mobile () _____

Email _____

Fire Company Affiliation _____

MEMBERSHIP TYPE Active Social Associate Honorary

Sponsoring Member (if any) _____

Were did you hear of us? _____

I, the undersigned, do hereby apply for membership in the Red Knights International Motorcycle Club, New York Chapter 22. I agree to abide by the Bi-laws and constitution of the club and the rules and regulations governing the club.

Signature _____ Date _____

Annual Dues: \$30 for Active or Social Member

****Dues and a copy of a valid motorcycle license must accompany the application****

[Membership Committee Use only]

Application: ***Approved*** ***Rejected***

Dues Received: ***Yes*** ***No***

Signature _____ ***Date*** _____

**Please bring application with dues to any meeting or event:
For Meeting or Event Times and Locations please Contact the Secretary:
Scott Cleere: secretary@rkmcny22@gmail.com or 585-285-9117**

***Please Print this form out and bring with you to a meeting,
this Form DOES NOT forward to the club***