

ROCHESTER PEACEMAKERS, INC.

MEMBERSHIP APPLICATION

NAME _____
(LAST) (FIRST) (MI)

ADDRESS _____
(STREET) (CITY) (ZIP)

HOME PHONE _____ WORK PHONE _____

E-MAIL ADDRESS _____ CELL PHONE _____

EMPLOYER NAME & ADDRESS _____

AMA MEMBERSHIP NUMBER _____

MOTORCYCLE _____
(YEAR) (MAKE) (MODEL)

LICENSE PLATE # _____ INSURED BY _____

INTEREST OR HOBBIES _____

OTHER CLUB MEMBERSHIPS _____
(INDICATE PAST AND PRESENT)

IN CASE OF EMERGENCY, PLEASE CONTACT _____

ADDRESS & PHONE NUMBER _____

IF NO ANSWER, PLEASE CALL _____

(ADDRESS & PHONE NUMBER _____

HOW DID YOU HEAR ABOUT THE PEACEMAKERS? _____

(SPONSOR'S SIGNATURE) (APPLICANT'S SIGNATURE)

.....
PEACEMAKER USE ONLY

APPROVED BY _____

DUES PAID _____

DATE PAID _____

() PROB. () ASSOCIATE

DATE VOTED IN AS FULL MEMBER (PROBATIONARY ONLY) _____

DATE COLORS ISSUED _____

AMOUNT PAID _____