



# PLAYERS KINGS & QUEENS M.C.

## MEMBERSHIP APPLICATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY : \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CONTACT NUMBERS: \_\_\_\_\_  
Cell - (Can you text Y or N )

EMAIL: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

EMERGENCY CONTACT NUMBER(S): \_\_\_\_\_

MOTORCYCLE: (Make) \_\_\_\_\_ (Model) \_\_\_\_\_ (Color) \_\_\_\_\_

RIDING EXPERIENCE: \_\_\_\_\_ PROOF OF LICIENCE/PERMIT: YES OR NO

SPONSOR: \_\_\_\_\_ PROOF OF INSURANCE: YES OR NO

WHAT CAN YOU OFFER CLUB: \_\_\_\_\_

Start Date of Probation: \_\_\_\_\_ End Date of Probation: \_\_\_\_\_

Joining Fee: \_\_\_\_\_

Acceptance Date: \_\_\_\_\_ Rejection Date: \_\_\_\_\_

President: \_\_\_\_\_ Secretary: \_\_\_\_\_

Investigation Committee: \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Sponsor \_\_\_\_\_