

**Rusty's Riders
Motorcycle Club**
Application for membership

Date of Application; _____ Applying for _____ Single Membership _____ Joint Membership _____

Member #1 Last Name: _____ First Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone#: (____) _____ Cell Phone#: (____) _____

E-mail address: _____

Bike Information: Year _____ Make: _____ Model: _____

Any Courses taken (i.e.; safety courses): _____ Other M/C Club Affiliations/Membership; _____

Personal Information: Date of Birth; _____ Anniversary _____

Member #2: Last Name; _____ First Name; _____

Address: _____ City; _____ State; _____ Zip: _____

Home Phone #: (____) _____ Cell Phone #: (____) _____

E-mail address: _____

Bike Information: Year _____ Make; _____ Model; _____

Any Courses taken (La.; safety courses); _____ Other M/C Club Affiliations/Membership; _____

Personal Information; Date of Birth; _____ Anniversary: _____

*I agree to abide by the guideline/rules/by-laws of Rusty's Riders WC.
I agree to keep the Secretary and Treasurer advised of any changes in my mailing
address, telephone #, and e-mail address so that information about club events can
be sent to me in a timely fashion as long as I am an active (dues paid) member in
good standing.*

Member #1 Signature _____ Member #2 Signature _____

Dues Paid;

Single Membership _____ \$10.00 first year/ \$5.00 each returning year Officer initials; _____ Date; _____

Joint Membership; _____ \$20.00 first year/ \$10.00 each returning year Officer Initials; _____ Date; _____

Mail completed application and check payable to: Rusty's Riders Motorcycle Club
C/O President Jerry Edwards
P.O. Box 2
South Canaan, PA 18459-0002

Original to be kept on file with Treasurer
Copy to be made and given to Secretary