

**FIRE AND IRON MOTORCYCLE CLUB
WEST CENTRAL FLORIDA - CHAPTER 15
MEMBERSHIP APPLICATION**

NAME: _____ Date _____

ADDRESS: _____

HOME PHONE #: _____ CELL # _____ STATION # _____

E-MAIL ADDRESS: _____ DOB _____

FIRE DEPT./STATION/SHIFT: _____

MAKE/MODEL OF BIKE _____

EMERGENCY CONTACT NAME/NUMBER (a): _____

EMERGENCY CONTACT NAME/NUMBER (b): _____

ARE YOU BEING SPONSORED? Y/N (circle one)

IF "YES" ABOVE - SPONSOR'S NAME? _____

ARE YOU SPONSORING A MEMBER? Y/N (circle one)

IF "YES" ABOVE - MEMBER'S NAME? _____

RELATIONSHIP TO SPONSOR(ED)? _____

CIRCLE ONE: RIDER / PASSENGER

**Make Check or Money Order payable to:
(Info at bottom of <http://www.fireandiron15.com/memsubmit.html>)**

I THE UNDERSIGNED, UNDERSTAND THE RULES AND RESPONSIBILITIES OF MEMBERSHIP IN
FIRE AND IRON MOTORCYCLE CLUB AND PLEDGE LOYALTY TO THE CLUB TO THE BEST OF
MY ABILITY!

PRINT NAME: _____

SIGNATURE: _____