



Green Knights Military Motorcycle Club Membership Application Form

Personal Information:

Name: Last _____ First _____ M.I. _____

Residential address:

Street _____ city _____ state _____ zip _____

Home no. (_____) _____ Work no.(_____) _____

Email Address _____

(Primary) Bike Information:

Type (circle one): cruiser dirt motocross sport other

Year: _____ Make: _____ Model: _____ Engine size: _____ cc

Do you currently own more than one bike? Y N

If yes, briefly describe (as above) the other bike(s):

Rider Information:

Years of riding experience (circle one): 0-1 1-3 3-5 5-10 10+

Extra riding courses taken (outside of the MSF Basic RiderCourse™):

1) _____
Name of course _____ Name of school, location _____

2) _____
Name of course _____ Name of school, location _____

Mentorship Information:

If qualified, would you be interested in being a mentor? Y N

If yes, what area or what type of bike would you like to mentor on?

(answer) _____

Regardless of years of experience, would you like to have a mentor? Y N

If yes, in what area would you like to be mentored in?

(answer) _____

Questions, comments, or suggestions for what you want to see in the bike club this year:

Thank you!