

Application for Membership in: **The Syria Motor Corps**NOTE: Please submit the completed application and \$60.00
Membership Fee. Should the application be rejected the membership Fee will be returned.

I hereby make application to the Syria Motor Corps.

Name				Nickname		
Spouse				Nickname		
Address				State	Zip	
City						
Phone:	Home			Cell		
Email(s)						
Age		leight	Weight	Occupation _		
Blue Lodg	e name				Blue Lodge number	
			ownership, or at le		er the termination of my membership in the I of a vehicle, within 30 days after my application roved.	
I wish to b	oe a member (of the followin	g division(s):			
Motorcyc	l e : White Ha	rleys	Touring division	on		
Four Whe	el: Mini Mod	del T	Yellow Roadst	er		
Antique/0	Classic:	Make	e	Model	YearYear	
Trike:		Make				
I am	_, I am not	license	d to drive a motoro	ycle.		
Date		Syria (Card #			
Applicant	signature					
Recomme	ender					
					夏1 % A	
					A MARINE	
					AR)	
Mail to:	Syria Motor (-				

1877 Shriner Way Cheswick, PA. 15024