



Name \_\_\_\_\_  
*Last First Middle*

Address: \_\_\_\_\_  
*Street/PO Box*

\_\_\_\_\_ *City State Zip Code*

\_\_\_\_\_ *County*

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Occupation \_\_\_\_\_

List other organizations of which you are a member. Are you active in them?

\_\_\_\_\_  
\_\_\_\_\_

Have you been made aware of the activities and expenses of the Motor Patrol?

\_\_\_\_\_

Why do you wish to join the Motor Patrol?

\_\_\_\_\_

Are you currently active in any other Shrine units at present? \_\_\_\_\_

If so, which unit(s)? \_\_\_\_\_

What will you be riding? Motorcycle \_\_\_\_\_ Miniature Car/type \_\_\_\_\_

Classic/Antique Car \_\_\_\_\_

Do you carry insurance on your vehicle that meets NYS requirements (if applicable)

\_\_\_\_\_

Wife or significant other's name \_\_\_\_\_ Occupation \_\_\_\_\_

Anniversary date \_\_\_\_\_ Date of birth \_\_\_\_\_

Noble's Signature \_\_\_\_\_

Presented by

\_\_\_\_\_

Date presented \_\_\_\_\_