



IRON SPARTANS
LAW ENFORCEMENT
MOTORCYCLE CLUB

IRON SPARTANS MOTORCYCLE CLUB™
APPLICATION

Chapter: _____ State: _____ Region: _____

Last Name: _____ First Name: _____

Nick Name: _____ DOB: _____

Address: Number & Street: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: Primary: _____ Secondary: _____

E-mail Address: _____

Sponsor: _____

Peace Officer Status: Active Retired

Employing Agency: _____

Drivers License State/ Number: _____

M/C Endorse: Yes No

Motorcycle: Year: _____ License Number: _____

Make: _____ Model: _____

Insurance Company & Policy Number: _____

I have been provided, read, and understand the Iron Spartans™ Bylaws. I am fully aware of the conditions of membership and will abide by all Club rules and regulations. I release the ISMC from any and all liability and hold the ISMC harmless of any and all civil claims arising from any ISMC event, activity, or circumstance. *The Applicant acknowledges that the Iron Spartans Patch is the property of the Iron Spartans Motorcycle Club™, Inc. and will be returned without delay upon separation from the Club.*

Signature: X _____ Date _____

FOR CLUB USE ONLY

Attached Copies of: Peace Officer ID DDL Veh Reg Proof of Ins

Dues Collected: Application Fee \$150.00 Annual Dues Prorated From Month _____ \$ _____