

Iron Horse Saints Motorcycle Ministry
Application for Membership

(Please read Iron Horse Saints Guidelines before completing this form.) Please print.

Name _____ Age _____

Phone Number _____ Cell phone _____

Address _____ City/State/Zip _____

E-mail _____ Occupation _____

Emergency Contact: Name _____ Phone _____

Are you a born again believer in Jesus Christ? YES NO When saved (age)? _____

Where were you saved? _____

Have you read, understood and accepted the Statement of Faith of Iron Horse Saints? YES NO

Do you faithfully attend and financially support a local church? YES NO

Church Name _____

Church Address _____ Church phone _____

Pastor's Name _____

Brief testimony of salvation experience: (attach separate sheet if necessary)

Why are you seeking membership in the Iron Horse Saints? (attach separate sheet if necessary)

Do you currently own a motorcycle? YES NO Number of years riding experience? _____

Make/Model/Year: _____

Applicant's Signature: _____ Date: _____

THIS PORTION TO BE COMPLETED BY IRON HORSE SAINTS LEADERSHIP ONLY

PRINTED NAME

POSITION

SIGNATURE

DATE

Complete the Application form and mail to:

Iron Horse Saints
3801 Sloop Drive
Lake Havasu City, AZ 86406