



The Buffalo Bulldogs, MC Membership Application

Address Update?: _____

Updated: _____

Achtung! Fill in the non-shaded areas below, Items marked with an "" are required. If non-applicable, please write "none". Return the completed form to the president of the Buffalo Bulldogs, or Pledge-Master with your \$5.00 non-refundable application fee.*

****INCOMPLETE FORMS WILL NOT BE CONSIDERED**.**

*TYPE OF MEMBERSHIP: Full Member _____, Associate Member _____,
Please check or circle appropriate classification.

Reserve __ or Honorary __
For use by full members of the Buffalo Bulldogs, MC

APPLICANT NAME: * _____

HOME PHONE: * _____ ALTERNATE PHONE (ex. Cell): _____

HOME ADDRESS: * _____

CITY: * _____ STATE/PROVINCE: * _____ ZIP: * _____

E-MAIL ADDRESS: _____ @ _____ . _____

*Please state briefly why your wish to be considered for membership:
Reserve applicant, please state reasons for change to reserve from full membership:*

* _____

I, the undersigned, affirm that I am not currently a full member of any other leather club or any other club of similar intent or purpose and that I wish to be considered for Full Membership (or Reserve Membership) with the Buffalo Bulldogs, MC.

-OR-

I, the undersigned, affirm that I wish to be considered for Associate Membership into the Buffalo Bulldogs, MC.

* _____ * _____
Date Mark or signature of applicant

APPLICANT: DO NOT WRITE OR MARK BELOW THIS LINE

Signature of first sponsor: _____ Date: _____

Signature of second sponsor: _____ Date: _____

Signature of third sponsor: _____ Date: _____

APPLICATION ACCEPTED?

Yes: _____ No: _____

PLEDGE START / COMPLETION DATE: _____

MARK OR SIGNATURE OF PLEDGE MASTER: _____

MEMBERSHIP VOTE APPROVED?

Yes: _____ No: _____

DATE OF VOTE: _____