

Vermont Widows Sons Motorcycle Association Application for Membership

Indicate (^) chapter: Grand Chapter ____

Last name: _____ First: _____ M.I. _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: () _____ Home phone: () _____

** Primary phone should be mobile phone most carried. This number is used for communications when traveling.

E-Mail Address: _____ Date of Birth: _____

** E-Mail is the primary means of communication for rides, events and last-minute notices. This should be an e-mail that is regularly accessed.

Masonic History:

Are you currently a Master Mason in good standing of a Masonic Blue Lodge? ___ Yes ___ No

If no please check appropriate: Candidate Entered Apprentice Fellowcraft Are

you a Past Master _____ Yes ___ No

Lodge Name: _____ City/State _____

Membership in other Appendant Bodies: _____

Co-Riders Name: _____ Relation: _____

Motorcycle: Year: _____ Make: _____ Model: _____ Displacement: _____

Which other motorcycle associations or organizations do you belong to: _____

Candidate is to purchase their own vest. The Widows Sons will provide patches. Candidate is responsible to contact Country Cobbler, 1 Glen Road Plaza, Rt. 12A W. Lebanon NH to arrange for patches put on their vest.

I swear that the above information is true to the best of my knowledge. I further swear that I am currently a Master Mason in good standing in a regularly constituted lodge of Freemasons recognized by the Grand Lodge of the state in which I reside, or I have petitioned a Lodge of Freemasons and have been elected to receive degrees of Freemasonry. Furthermore, I am applying for membership in the Widows Sons of my own free will and accord. I understand and fully accept that my membership may be suspended at any time should any information I have submitted prove to be untruthful or should I violate any of the By-laws of my Chapter. The decision of the President of the Chapter shall be final.

I further attest that I have read and fully understand the disclaimer at the bottom of this application.

Applicant Signature: _____ Date: _____

Recommended by: _____ Date: _____

Lodge membership verified by: _____ Date: _____

Membership fee: \$250.00** which includes patch set, vest, and first year's dues. Annual dues are paid by March 1st thereafter. Make check payable to: Widows Sons VT Chapter. Mail or E-Email to: Pat Sloan P.O. Box 63 Coventry, VT 05852-0063 patsloan52@gmail.com

**price determined on 7/22/13 chapter meeting, subject to change as to cover cost of patches and vest

Disclaimer: The Widows Sons is an independent group of internationally based Master Masons who ride motorcycles and have organized to perform the laudable undertaking of aiding and assisting the widows of master masons, to promote Freemasonry in the world of motorcycling, to promote the world of motorcycling in the world of Freemasonry, and to support the charities of the Vermont Widows Sons Masonic Riders Association. All views and opinions of the Widows Sons International Association are solely those of the Widows Sons. The Widows Sons do not speak for, nor intend to act as representatives of any Vermont Masonic Lodges, Symbolic Lodge and Affiliate bodies of Freemasonry or Freemasonry in general.