

Blue Knights NJ IX 2022 Dues

*** This form is required for all renewals and must be filled out completely and signed at the bottom ***

| Description | Unit Price | Total |
|---|-----------------|----------------|
| Blue Knights Dues - Yearly Renewal | \$40.00 | \$40.00 |
| Total | | \$40.00 |
| <i>NOTE: add \$5.00 late fee for any renewal sent in after Jan 31</i> | Late Fee | |
| Total Enclosed | | |

Make check payable to "BKNJIX" and send to: BKNJIX Renewal, 66 Main Street, Sparta, NJ 07871

You can also pay dues via PayPal www.bknjix.org

If you do not wish to renew please notify us by mail or email (nj9@blueknights.org)

Please PRINT the following information clearly and legibly!!!

| | | | |
|---|------------|---------------------|--------------------------------|
| Last Name | First Name | Nickname | |
| Address | | | |
| City | State | Zip Code | |
| Home Phone | Cell Phone | | |
| E-Mail | | | |
| Motorcycle Make | Year | Model | |
| Motorcycle #2 | Year | Model | |
| Law Enforcement Agency Employed By | | | |
| Your Title/Position | Circle One | Full Time (32+ hrs) | Part Time (less than 32hrs) |
| Compensation From This Agency | Salary | Workman's Comp | Other: |
| If Retired, Number of Years Served | Regular | Disability | Other: |
| This is my Primary Employment | Yes | No | If Part Time Approx Hrs per Yr |
| If NO, Primary Employer is | | | |
| Do you/Did you have statutory arrest powers | | Yes | No |

Ride/Club Survey (optional)

| | |
|--|---|
| How many "official" club rides did you attend this year? | How many of these were for charity? |
| Did you do any Saturday rides? | Would you like to see more weekday evening rides? |
| On a scale of 1-10, 10 being the best, how would you rate this year's ride schedule? | |
| Would you like to see more entertainment events during the year? | If yes, what events would you like to have? |
| Have you attended past parties? | If yes, how would you rate those parties, 1-10 |
| How many meetings did you attend this year? | How would you rate the meetings? 1-10 |
| What did you like and/or dislike about the above events? | |

Do you have any other questions, comments or concerns?

**** Signature Required ****

I certify the above information to be true to the best of my knowledge. I also acknowledge that any club colors (Blue Knights Rockers and Bald Eagle vest back patches), Blue Knights Logo patches and Blue Knight badges issued to me by the club are considered property of the club and must be returned to the club upon my resignation or termination from membership and I will be reimbursed for these on a prorated basis.

Signature: X

Final Notice - Blue Knights NJ IX 2021/2022 Dues

*** This form is required for all renewals and must be filled out completely and signed at the bottom ***

| Item # | Description | Unit Price | Total |
|---|-------------------|------------------|----------------|
| 2021 | Blue Knights Dues | \$40.00 | \$40.00 |
| 2022 | Blue Knights Dues | \$40.00 | \$40.00 |
| If you do not know if you paid your 2020 dues contact Club President: Kevin Hyland | | Subtotal | \$80.00 |
| | | 2020 Late Fee | \$5.00 |
| | | Total Due | \$85.00 |

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If you do not wish to renew, please notify us by email, nj9@blueknights.org, or snail mail

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| | | | |
|--|------------|---------------------|---------------------------------|
| Last Name | First Name | Nickname | |
| Address | | | |
| City | State | Zip Code | |
| Home Phone | Cell Phone | | |
| E-Mail | | | |
| Motorcycle Make | Year | Model | |
| Motorcycle #2 | Year | Model | |
| Law Enforcement Agency Employed By | | | |
| Your Title/Position | Circle One | Full Time (32+ hrs) | Part Time (less than 32hrs) |
| Compensation From This Agency | Salary | Workman's Comp | Other: |
| If Retired, Number of Years Served | Regular | Disability | Other: |
| This is my Primary Employment | Yes | No | If Part Time Aprox Hrs per Year |
| If NO, Primary Employer is | | | |
| Do you/Did you have statutory arrest powers | Yes | No | |
| Ride Survey (optional) | | | |
| What rides did you like from past year(s)? | | | |
| | | | |
| What rides would you like to add? | | | |
| | | | |
| What changes would you like to see? | | | |
| | | | |
| Do you have any other questions, comments or concerns? | | | |
| | | | |

**** Signature Required ****

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Signature: X