

**Meeting Information:**

Please Check our Facebook Page  
for Time & Place

**Mailing Address:**

Patriot Riders  
P.O. Box 1414  
Newburyport, MA 01950-8414

**Website:**

<http://www.patriotriders-ne.com>

**Email Contact:**

[Iggy4099@yahoo.com](mailto:Iggy4099@yahoo.com)

**Contact Us:**

John "Iggy" Surowiec  
President \* Patriot Riders, MA-1  
(978) 502-9186

**Mission Statement**

Patriot Riders'© major functions are to help all American Veterans; people in our communities; encourage rider participation in events; and to promote motorcycle safety. We support the Constitution of the United States, the right to freedom and our fellow members.

Patriot Riders© is not connected with or an affiliate of any other organization and we do not raise funds for profit.

We are not as yet a non-profit organization, which will operate under the guidelines of the Federal Government for a non-profit organization as defined by section 501c(3) of the Internal Revenue Code of 1986. Our notice of intent will be on file soon.

All Patriot Riders© members donate his or her time because they believe in the issues stated above. Meetings must be orderly and each member has the right to be heard. Every member is as important as the next. Everyone has different views and we must all work together in an orderly fashion.



**Massachusetts Chapter One - Membership Application**

Name: \_\_\_\_\_ Nickname/Handle: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

In understand that Patriot Riders does not assume responsibility for any aspect of my safety and that if I participate in any Patriot Riders event, I do so voluntarily on my own assessment of my ability, the routes, and all facilities and conditions, assuming all risk; and I release and hold Patriot Riders, it's members and officers, harmless for any injury or loss to my person or property which may result. I also hereby certify that I am in compliance with my state's financial responsibly laws regarding carrying the proper insurance.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Sponsor: \_\_\_\_\_

Check us out on Facebook:

<http://www.facebook.com/pages/Patriot-Riders-NE-Massachusetts-Chapter-One/238717786194702>