



HOIST MEN OF LEATHER & FETISH CLUB

FULL MEMBERSHIP APPLICATION

(ALL APPLICANTS MUST BE AT LEAST 21 YEARS OF AGE)

Name: _____ Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____

- Yes No • As a member of HOIST, are you willing to abide by the rules of HOIST, as set forth in the By-Laws & Standing Rules of Order, in order to uphold the aims and purposes of the club?
- Yes No • As a member of HOIST, are you willing to assume the responsibility of making the club an asset to the community?
- Yes No • As a member of HOIST, are you willing to extend your hand in the promotion of brotherhood, friendship, and courtesy to all of your fellow club members, as well as members of similar clubs, regardless of your personal feelings towards them?
- Yes No • As a member of HOIST, would you consider serving in an official capacity?
- Yes No • As a member of HOIST, are you able to provide overnight accommodations for out-of-town guests from other clubs if the need should arise?
- Yes No • Are you currently or have you previously been a member of any similarly oriented clubs? If "Yes", please attach a letter of good standing from any of your previously affiliated clubs.

Please list your fetish(es) and any talents and/or skills that could be an asset to the club:

Emergency Contact: _____ Phone: _____

Relationship: _____ Yes No • Are you "Out" to your emergency contact?

Applicant's Signature: _____ Date: _____

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Sponsor 1: _____ Pledgeship Start Date: _____

Sponsor 2: _____ Pledgeship End Date: _____