

# The Bikers And Needy Children Foundation <sup>tm</sup>

A CHAIRTY FOR INJURED BIKERS

214 CECIL AVE. SPRING LAKE NC.

Ph. (910)551-1161--Fax (910)497-0188

WEBSITE: [www.thebikersandneedychildrenfoundation.com](http://www.thebikersandneedychildrenfoundation.com)

E-MAIL: [thebancfoundation@yahoo.com](mailto:thebancfoundation@yahoo.com)

## Application for Assistants

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Income \_\_\_\_\_ Email \_\_\_\_\_

Names of 3 references \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Injury that is keeping you from working \_\_\_\_\_

How was injury incurred? \_\_\_\_\_

How long are you expected to be out of work? \_\_\_\_\_

Copy of Medical Report \_\_\_\_\_

Copy of Police Report If Traffic Accident \_\_\_\_\_

Explanation as to what kind of assistants you need? \_\_\_\_\_

Mortgage Payment \_\_\_\_\_

Rent \_\_\_\_\_

Utilities \_\_\_\_\_

Food \_\_\_\_\_

Sign Name \_\_\_\_\_ Date \_\_\_\_\_