

VIETNAM VETERANS MEMORIAL AMERICAN LEGION RIDERS CHAPTER 295

★ PO Box 690 ★ GERMANTOWN ★ MD 20875 ★





Member Information Form/Application for Membership

About You: Complete this section in its entirety	y.	
Last Name:	First Name:	
Nickname/Rider Name:		
Home Address:	Apt:	
City:	State: Zip:	
Home Phone: ()C	Cell Phone: (
Wife/Husband:		
Birth Date:/ email address: _		
Member of:Legion SALAuxiliary	at Post # Member#:	
Emergency Contact Name:	Phone: ()	
	will be riding a motorcycle with the ALR. Cross it out if Model: Displacement:	
	ate statement below, draw a large "X" through the statement that doe u do not own a motorcycle, also put a large "X" through the "About y	
and/or local licensing and registration requirements. my passengers, and my motorcycle which meets at le certify that I carry a valid driver's license with either	above is registered in my name and in accordance with state, city, I further certify that I carry property and liability insurance for myse east the minimum state, city, and/or local insurance requirements. I are a cycle endorsement or a valid Motorcyclist Temporary Instruction ws. If my status changes, I will request, complete, and submit a new	
	I will not be operating a e participating in American Legion Rider events as a passenger. If many member Information Form."	ıy
Signed:	Date: rtification of the relative section above by signing and dating.	
The American Legion Riders' or simply as 'Riders'), shall including myself during any Riders activities, even where understand and agree that all Riders members and their gu I release and hold the Riders officers and the American Le result through my participation in the Riders and/or their a	I the American Legion Motorcycle Association (henceforth referred to a lot be liable or responsible for damage to property or injury to persent the damage or injury is caused by negligence (except willful neglect uests participate voluntarily, and at their own risk in all Riders activitiegion harmless for any injury loss to my person or property that may activities. I understand that this means that I agree not to sue the Rider Legion for any injury resulting to myself or my property in connection.	ons t). I ties.
Signed:	Date: rtification of the relative section above by signing and dating.	
All members must signify their understanding and cer	rtification of the relative section above by signing and dating.	