DEVOTED FEW LEMC



UNITED STATES

Chapter	
State/Province	
Country	
PERSONAL INFORMATION	
Name:	_
Birthdate:	-
Sponsor:	-
Physical Address:	
City:	
State:	
Zip Code:	
Mailing Address if different:	
Email:	
Home Telephone:	
Cell Phone:	

In consideration of being granted membership in the Devoted Few LEMC and in consideration of being permitted to participate in any and all club sponsored functions, activities and Events, I agree to the following:

1. Liability Release and Assumption of Risk. I understand that my participation in an Event can expose me to dangers both from known and unanticipated risk, including, but not limited to, risk associated with riding my motorcycle to, from or during an Event or interaction with persons, including other members or others at an Event. I willingly and voluntarily assume all such risks, including those of loss, damage, or injury, including death, to myself and/or my property from any cause whatsoever. Moreover, acknowledging that such risk exists, I, for myself, my heirs, personal representatives and assigns, hereby release, discharge and hold harmless the Devoted Few LEMC, any of its affiliates, various chapters, members, promoters, landowners, and sponsors, owners and representatives, agents, successors, assigns, and employees of all of them (collectively "Released Parties") from any and all claims or liability for personal injury, including death, or property damage I may suffer resulting from, arising in connection with, or related to the Event, including, but not limited to, any claims arising out of the conduct of any Event or Event-related activity. I specifically release the Released Parties and each of them for the negligence, in any form of any or all the Released Parties. In signing this release,

I FULLY RECOGNIZE THAT IF I AM HURT AND/OR MY PROPERTY IS DAMAGED IN CONNECTION WITH THE EVENT, I WILL HAVE NO RIGHT TO MAKE A CLAIM OR FILE A LAWSUIT AGAINST THE RELEASED PARTIES, EVEN IF THEY OR ANY OF THEM CAUSED MY DEATH, INJURY, OR DAMAGE.

2. Indemnification. I agree to indemnify and hold harmless the Released Parties, individually
and/or collectively, from all lawsuits, claims, damages, costs, and attorneys' fees that arise out of my presence or conduct at an Event and/or my violation or my representative's violations of any provision of the Application. This provision will apply regardless of whether or not the lawsuit, claim, damages, costs and/or attorneys' fees arise out of the negligence, in any form, of any of the Released Parties. As I am releasing any claim my family, guardian, representative and/or estate might wish to make by reason of my injury or death, this indemnity provision shall specifically apply to such actions on my behalf and/or any such actions resulting from my injury or death.
Initials:

3. **Insurance Responsibility.** I understand that the Devoted Few LEMC provides neither health and/or life insurance. I assume all responsibility for my doctor and/or hospital expenses and any loss or injury to personal property or myself in which I may become involved in by reason of participating in an Event.

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Initial	s:		

Initials: _____

AUTHORIZATION FOR BACKGROUND CHECK

In connection with my application to Devoted Few LEMC, I hereby agree as follows:

4. GENERAL CONSENT TO BACKGROUND INVESTIGATION. As a condition of Devoted Few LEMC's consideration of my application, I give permission to the Devoted Few LEMC to investigate my personal and employment history. I understand that this background investigation may include, but the limited to, verification of all information given by me to the Club. I agree to pay a non-refundable of \$20 United States Dollars (USD) for my background investigation that will be conducted by a contracted third-party private investigations company.	y not
Initials:	
5. CONSENT TO CONTACT GOVERNMENT AGENCIES. I further give permission to the contracted third-party private investigations company and or to the Devoted Few LEMC to receive a copy of any information obtained in the file of any federal, state, or local court, or governmental ager concerning or relating to me. I further consent to the release of such information and waive any right under law concerning notification of the request for a release of such information. In the event a law does not provide for the contracted third-party private investigations company and the Devoted Few LEMC to have access to information, I hereby delegate the contracted third-party private investigations company and or the Devoted Few LEMC as my agent for the receipt of information. I understand that the scope of this investigation will be limited as required by applicable law.	t d or
Initials:	
6. COOPERATION WITH INVESTIGATION. I agree to fully cooperate in Devoted Few LEMC's background investigation, and to sign any waivers or releases that may be necessary or desired to obsaccess to relevant information. In the event that any former employer or other company or federal, state, or local governmental agency will not release reference information or criminal history information directly to the contracted third-party private investigations company and or the Devoted Few LEMC, I agree to personally request such information to the extent permitted by law.	
Initials:	
7. MISCELLANEOUS. This Agreement represents the entire understanding and agreement relating to its subject matter. Devoted Few LEMC shall be entitled fully to rely on this Agreement. I understand that I have no guarantee of being granted membership to the Devoted Few LEMC and that the Devoted Few LEMC may determine not to engage me for any reason, cause, or purpose of the Devoted Few LEMC's interest.	at

Initials: _____

EMPLOYMENT INFORMATION

Employer Name:	
Address:	
City:	
State/Province:	
Country:	
Zip Code:	<u>-</u>
Telephone:	Extension:
EMERGENCY CONTACT	
Name:	
Phone:	
Relationship:	
MOTORCYCLE INFORMATION Motorcycle Manufacturer:	
Year:	
Make:	
Model:	
LPN (License Plate Number):	
Insurance Company:	

OTHER INFORMATION

Have you ever been arrested? Yes No
Have you ever been convicted of a Felony? Yes No
Have you ever served in the armed forces of any country? Yes No
Have you ever received a discharge other than honorable from any Armed Forces Service? Yes
No
Have you ever, or do you now have, an Order of Protection issued against you? Yes No
*** If you have answered yes to any of the above questions, please explain:
If you have been a member of another Motorcycle Club, Riding Club, or Support Club, please list the club along with the reason why you are no longer with the club:

IMPORTANT NOTIFICATIONS:

- 1. I certify that I have completely read this Application and by signing below, accept the foregoing as a condition of my participation in events or membership with Devoted Few LEMC.
- 2. I the undersigned acknowledge that I shall abide by any and all Devoted Few LEMC By Laws,
 Operating Procedures and shall represent the Club in conduct that is respectful and professional at all times.
- 3. I the undersigned acknowledge that if I discontinue membership with the Club at any time, or if the Club terminates my membership; all Club patches shall be returned immediately to my respective Chapter President without reservation, and that I forfeit all funds, deposits, and dues made for prospect consideration, membership, and the purchase of patches.

I have provided a	photocop	y of a p	photo ID	with the	completion	of this form.
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Signature:	 Date:

A CONTRACT TO RELINQUISH POSSESSION OF THE CLUB COLORS

I,, as a condition of continuing membership in the	
Devoted Few Law Enforcement Motorcycle Club, acknowledge that the colors, as defined in the	e
DFLEMC Bylaws, are, and remain the property of the club. I further agree to relinquish	
possession of the colors upon the written request of any DFLEMC club officer due to my	
termination or upon my resignation from membership in the Club. I further agree upon	
resignation or termination of my membership in the Devoted Few LEMC, all dues paid will	
remain property of DFLEMC. I have read this contract and agree to abide by the terms and	
conditions and further agree that this contract shall be binding upon me in any court of law.	

This application for membership is executed by the applicant/member whose signature appears
below, on this the:
day of, 20 in the city of
State of
Print applicant NAME
Applicant SIGNATURE
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RETURN THE COMPLETED APPLICATION TO YOUR SPONSOR