

CHAPTER MEMBERSHIP ENROLLMENT FORM AND RELEASE

Chapter Name:		
Member Name:		
Mailing Address:		
City:	State:	Zip:
E-mail Address:		
Phone:	Member Nat'l H.O.G. Number	· ·
Expiration Date of National H.O.G.® Me	embership:	
I have read the Annual Charter for H.O.	G.® Chapters and hereby agree to abide by it as a	a member of this Dealer sponsored Chapter.
I recognize that while this Chapter is chits actions.	nartered with H.O.G.®, it remains a separate, ind	ependent entity solely responsible for
	THIS IS A RELEASE, READ BEFORE SIGN	ING
Chapter and their respective officers, or responsible for injury to me (includin Chapter activities and resulting from activities and resulting from activities and resulting from activities and their guests participate voluntarily arising out of the conduct of such activities person or property which may result from THAT I AGREE NOT TO SUE THE "RE	rley Owners Group® (H.O.G.®), Harley-Davidson, directors, employees and agents (hereinafter, the g paralysis or death) or damage to my property of the or omissions occurring during the performance used by negligence (except willful neglect). I under and at their own risk in all H.O.G.® activities and writies. I release and hold the "RELEASED PART from my participation in H.O.G. activities and EVE ELEASED PARTIES" FOR ANY INJURY OR RESPONNECTION WITH, THE PERFORMANCE OF TEVENT(S).	"RELEASED PARTIES") shall not be liable occurring during any H.O.G.® or H.O.G.® ce of the duties of the Released Parties, erstand and agree that all H.O.G.® members I assume all risks of injury and damage (IES" harmless from any injury or loss to my NT(S). I UNDERSTAND THAT THIS MEANS SULTING DAMAGE TO MYSELF OR MY
	WAIVER OF RIGHTS UNDER STATE STATU	
	ving from any state statute which would negate cout not limited to, Section 1542 of the California	
_	extend to the claims which the creditor does not which if known to him must have materially affect	
By signing this Release, I certify that I I representations made by the "RELEAS	nave read this Release and fully understand it and SED PARTIES".	d that I am not relying on any statements or
Member Signature:		_ Date:
Local Dues Paid \$:		Date:

RETURN THIS FORM TO YOUR CHAPTER

(Dues not to exceed maximum amount prescribed in, Annual Charter for H.O.G.® Chapters, as contained in the H.O.G.® Chapter Handbook.)

Central Midwest Harley Owners Group 725 N Rawhide Drive Olathe, KS 66061

Permission to use photographs, name.

I have read and understand the above:

I grant permission to Central Midwest Harley Owners Group, its representatives and Rawhide Harley Davidson to take photographs of me and my property in connection with our rides, events, and new member acknowledgement. I authorize Central Midwest Harley Owners Group, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that Central Midwest Harley Owners group may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

Signature	-
Printed name	-
Signature, parent or guardian _ (if under age 18)	
Date	
Expires	