2016 Dues:

\$10.00

ALR 20

Riegelsville Post 950 American legion Riders



238 Ash Lane, Riegelsville, Pennsylvania

2016

Membership Application and Information Form

(Must be filled out completely)

Last Name:	First Name:			
Address:				
City:	State	e	Zip:	
Home Phone#	Cell F	Phone#		
Spouse Name:	Ema	iil:		
Member of: Legion S	AL Auxiliary		Member #	
Emergency Contact Name:	Phone #			
About your bike: Year:	Make:	Model:	CC's	
Valid License:	Valid Registration:	Va	Valid Insurance:	
requirements. I further certify that I carry pro and/or local insurance requirements. I also ce Permit in accordance with state, city, and/or I	perty and liability insurance for myself, nr rtify that I carry a valid driver's license wi ocal laws. If my status changes, I will req	ny passengers, and my motor ith either a cycle endorsemer uest, complete, and submit a		
Signed.		Date	·	
Passengers: "I am joining as a passenger of the following American Legion Rider, but may he participa Membership Application as a Rider."		a passenger. If my Status cha	I will not be operating a motorcycle as an anges, I will request, complete, and submit a new	
Signed:		Date:		
for damage to property or injury to persons in neglect). I understand and agree that all Ride	American Legion, SAL. American Legion including myself during any Riders activities members and their guests participate vol. and American Legion Auxiliary; harmies. I understand that this means that I agr	es, even where the damage of sluntarily, and at their own ri- less for any injury, loss to my ee not to sue the Riders office		