

CHAPTER MEMBERSHIP ENROLLMENT FORM AND RELEASE

Rockstar HOG Chapter 4352

Chapter Name:		
Member Name:		
Mailing Address:		
City:	State:	Zip:
E-mail Address:		
Phone:	Member Nat'l H.O.G. Numb	per:
Expiration Date of National H.O.G.® Membership):	
I have read the H.O.G.® Chapter Charter and here	eby agree to abide by it as a member	of this Dealer sponsored Chapter.
I recognize that while this Chapter is chartered wits actions.	vith H.O.G., it remains a separate, inc	dependent entity solely responsible for
THIS IS	S A RELEASE, READ BEFORE SIG	ining
I agree that the Sponsoring Dealer, Harley Owne	ers Group® (H.O.G.®), Harley-Davidso	on, Inc., Harley-Davidson Motor Company, my
Chapter and their respective officers, directors, e or responsible for injury to me (including paralysis Chapter activities and resulting from acts or omis even where the damage or injury is caused by ne members and their guests participate voluntarily damage arising out of the conduct of such activities to my person or property which may result for THIS MEANS THAT I AGREE NOT TO SUE THE MYSELF OR MY PROPERTY ARISING FROM, CONSORING, PLANNING OR CONDUCTING	is or death) or damage to my propert ssions occurring during the performate egligence (except willful neglect). I ure and at their own risk in all H.O.G.® at ities. I release and hold the "RELEAST from my participation in H.O.G. actives "RELEASED PARTIES" FOR ANY DR IN CONNECTION WITH, THE PER	ty occurring during any H.O.G.® or H.O.G.® ance of the duties of the Released Parties, inderstand and agree that all H.O.G.® activities and I assume all risks of injury and SED PARTIES" harmless from any injury or dities and EVENT(S). I UNDERSTAND THAT INJURY OR RESULTING DAMAGE TO
WAIVER	R OF RIGHTS UNDER STATE STAT	TUTES
I further agree to waive all benefits flowing from a Indemnification Agreement including, but not limit	- · · · · · · · · · · · · · · · · · · ·	
"A general release does not extend to the time of executing the release, which if k		ot know or suspect to exist in his favor at the ffected his settlement with the debtor."
By signing this Release, I certify that I have read representations made by the "RELEASED PAR"	•	and that I am not relying on any statements or
Member Signature:		_

RETURN THIS FORM TO YOUR CHAPTER

_____ Date: ___