

The American Legion Riders Chapter 555
Albert E. Schwab American Legion Post 555 of Midway City, California.

Member Information Form/Application for Membership

(Print Legibly and complete this section in its entirety)

Last Name: _____ First Name: _____ Nickname/Rider Name: _____

Home Address: _____ Apt: _____ City: _____ State: _____ Zip: _____

Home Phone: (____)____-____ Cell Phone: (____)____-____ Birth Date: ____/____/____ e-mail: _____

Spouse Name (M/F): _____

Member of: Legion Sons (SAL) or Auxiliary at Post # _____ Member#: _____
(ALR members MUST have a current and valid membership card: Legionnaire, Auxiliary members, Sons (SAL))

Emergency Contact Name: _____ Phone: (____)____-____
(This is who we would contact should something happen to you)

About your bike: Complete this section if you will be riding a motorcycle with the ALR group. Only omit this if you are a passenger

Make: _____ Model: _____ Displacement: _____

About the lawyers: Draw a large "X" through the statement that does not apply to you, and sign and date BOTH sections. If you do not own a motorcycle, also put a large "X" through the "About your bike" section.

"I, the undersigned, certify that the motorcycle listed above is registered in my name and in accordance with state, city, and/or local licensing and registration requirements. I further certify that I carry property and liability insurance for myself, my passengers, and my motorcycle which meets at least the minimum state, city, and/or local insurance requirements. I also certify that I carry a valid driver's license with either a cycle endorsement or a valid Motorcyclist Temporary Instruction Permit in accordance with state, city, and/or local laws. If my status changes, I will request, complete, and submit a new Member Information Form."

"I am joining as a passenger of the following Rider: _____ I will not be operating a motorcycle as an American Legion Rider, but may be participating in American Legion Rider events as a passenger. If my status changes, I will request, complete, and submit a new Member Information Form."

Signed: _____ Date: _____ / 20__

All members must signify their understanding and certification of the relative section above by signing and dating here. "I, the undersigned, agree that the American Legion, and the American Legion Motorcycle Association (henceforth referred to as 'The American Legion Riders' or simply as 'Riders'), shall not be liable or responsible for damage to property or injury to persons including myself during any Riders activities, even where the damage or injury is caused by negligence (except willful neglect). I understand and agree that all Riders members and their guests participate voluntarily, and at their own risk in all Riders activities. I release and hold the Riders officers and the American Legion harmless for any injury loss to my person or property that may result through my participation in the Riders and/or their activities. I understand that this means that I agree not to sue the Riders officers, whether local, state or national, nor the American Legion for any injury resulting to myself or my property in connection with and Riders activities."

Signed: _____ Date: _____ / 20__

All members must signify their understanding of and agreement with the above by signing and dating here.

**Return the completed application along with a photo copy of your drivers license with MC endorsement,
a copy of your proof of insurance and your American Legion Membership Card to:**

**American Legion Post 555
14582 Beach Blvd
Midway City, California 92655
Attn: ALR President**