RoadRunner H.O.G. Chapter 5112 Official Sign-In Sheet



Road Captain:
Miles This Ride:
Date:
Ride:

	Print Name	Signature	R	Р	Mileage	Last 6 Vin	Year
1							
2					3/1/2		
3					, 3/		
4							
5							
6							
7							
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9							
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21							-
22							
23							
24							
25							

	Print Name	Signature	R	Р	Mileage	Last 6 Vin	Year
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27							
28							
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30							
31		·					
32							
33							
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47	*						
48							
49							
50							

Road Captain Sign In

Date: # of Bikes: Ride	e Name:				
RC Names:					
1.	6.				
2.	7.				
3.	8.				
4.	9.				
5.	10.				
Road Captain Check List					
☐ Greeting, Everyone Sign-in, Guest sign Release form	m				
☐ Any New members want to introduce themselves					
☐ Identify Lead, Shotgun and Sweep, other RC assign	ments				
☐ Who has a First aid kit, any trained personnel					
☐ Discuss Destination and Route, Identify smallest tan	ık				
☐ We ride in a Stagged formation: maintain spacing					
☐ Stay in own wheel track					
☐ Stay 2 sec behind rider in your wheel track a	nd 1 sec behind ride opposite wheel track				
☐ If we move to Single file: maintain your spacing	•••				
☐ Which means you may Use full lane, 2 sec b	ehind rider ahead				
☐ Please use & pass back hand signals					
Two fingers, staggered formation					
One finger, single file					
Point to road hazards with hand or foot					
 Left, Right, slow down, stop 					
Tighten up our Stagger Formation					
On your own signal					
 Lost rider, hold fist up until rider ahead acknowle 	edges signal is passed forward to Lead				
☐ Do not change lanes until Lead moves over - Follow	the Leader				
•	tile Leadei				
☐ Maintain position during a ride					
☐ Let vehicles into formation if needed	Jane				
□ New riders, we suggest they ride in front, behind the					
☐ Lead Road Captain will slow for stale green light; std	op on yellow				
☐ Incidents: only Sweep stops (First aid kit if needed)					
☐ If Group gets separated: explain use of cookie crumb					
□ Early departures ride in rear, let Lead know, wave off, other riders move forward to fill gap					
□ Round Trip or Destination Ride? - No drinking alcohol or use of drugs while ON chapter ride					
☐ QUESTIONS or COMMENTS					
☐ Ride Your Own Ride – Be responsible - Have FUN a	and Ride SAFE				
Signatures:					
Lead RC: Swe	eep RC:				
Shotgun: Sw	eep RC:				

Revised: 7/3/2024



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.® Membership:
I have read the H.O.G.® Chapter Charter and hereby agree to abide by it as a member of this Dealer sponsored Chapter.
I recognize that while this Chapter is chartered with H.O.G.®, it remains a separate, independent entity solely responsible for its actions.
THIS IS A RELEASE, READ BEFORE SIGNING
I agree that the Sponsoring Dealer, Harley Owners Group® (H.O.G.®), Harley-Davidson, Inc., Harley-Davidson Motor Company, my Chapter and their respective officers, directors, employees and agents (hereinafter, the "RELEASED PARTIES") shall not be liable or responsible for injury to me (including paralysis or death) or damage to my property occurring during any H.O.G.® or H.O.G.® Chapter activities and resulting from acts or omissions occurring during the performance of the duties of the Released Parties, even where the damage or injury is caused by negligence (except willful neglect). I understand and agree that all H.O.G.® members and their guests participate voluntarily and at their own risk in all H.O.G.® activities and I assume all risks of injury and damage arising out of the conduct of such activities. I release and hold the "RELEASED PARTIES" harmless from any injury or loss to my person or property which may result from my participation in H.O.G. activities and EVENT(S). I UNDERSTAND THAT THIS MEANS THAT I AGREE NOT TO SUE THE "RELEASED PARTIES" FOR ANY INJURY OR RESULTING DAMAGE TO MYSELF OR MY PROPERTY ARISING FROM, OR IN CONNECTION WITH, THE PERFORMANCE OF THEIR CHAPTER DUTIES IN SPONSORING, PLANNING OR CONDUCTING SAID EVENT(S).
WAIVER OF RIGHTS UNDER STATE STATUTES
I further agree to waive all benefits flowing from any state statute which would negate or limit the scope of this Release and Indemnification Agreement including, but not limited to, Section 1542 of the California Civil Code which provides:
"A general release does not extend to the claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known to him must have materially affected his settlement with the debtor."
By signing this Release, I certify that I have read this Release and fully understand it and that I am not relying on any statements or representations made by the "RELEASED PARTIES".
Member Signature: Date:

RETURN THIS FORM TO YOUR CHAPTER



CHAPTER EVENT RELEASE FORM FOR ADULTS

Name of EVENT(S) :	Date:
Location:	

The undersigned (on my own behalf and on behalf of my heirs, personal representatives, successors and assigns), for and in consideration of the opportunity to participate in a "Ride," "Poker Run," "Rally," "Field Meet" or "Activity" (hereinafter, **EVENT(S)** sponsored and/or conducted by Harley-Davidson, Inc., Harley-Davidson Motor Company, the Harley Owners Group, authorized Harley-Davidson Dealer(s) and/or local H.O.G.® chartered Chapter(s) and their respective officers, directors, employees and agents (hereinafter, the "RELEASED PARTIES") releases and holds harmless the "RELEASED PARTIES" from any and all claims and demands, rights and causes of action of any kind whatsoever which I now have or later may have against the "RELEASED PARTIES" in any way resulting from, arising out of, or in connection with the performance of their Chapter duties and my participation in any said **EVENT(S)**.

This Release extends to any and all claims I have or later may have against the "RELEASED PARTIES" resulting from or arising out of their performance of their Chapter duties whether or not such claims result from negligence (except willful neglect) on the part of any or all of the "RELEASED PARTIES" with respect to the EVENT(S) or with respect to the conditions, qualifications, instructions, rules or procedures under which the EVENT(S) are conducted or from any other cause. I UNDERSTAND THAT THIS MEANS THAT I AGREE NOT TO SUE ANY OR ALL OF THE "RELEASED PARTIES" FOR ANY INJURY RESULTING TO MYSELF OR MY PROPERTY ARISING FROM, OR IN CONNECTION WITH THE PERFORMANCE OF THEIR CHAPTER DUTIES IN SPONSORING, PLANNING OR CONDUCTING THE EVENTS.

I am experienced in and familiar with the operation of motorcycles and fully understand the risks and dangers inherent in motorcycling. I am voluntarily participating in the **EVENT(S)** and I expressly agree to assume the entire risk of any accidents or personal injury, including death, which I might sustain to my person and property as a result of my participation in the events, and any negligence (except willful neglect) on the part of any or all of the "**RELEASED PARTIES**" in performing their chapter duties.

WAIVER OF RIGHTS UNDER STATE STATUTES

I further agree to waive all benefits flowing from any state statute which would negate or limit the scope of this release and Indemnification Agreement, including but not limited to Section 1542 of the California Civil Code which provides:

"A general release does not extend to the claims which the creditor does not know or suspect to exist in his favor at the time of executing this release, which if known to him must have materially affected his settlement with the debtor."

By signing this Release, I certify that I have read this Release and fully understand it and that I am not relying on any statements or representations made by the "RELEASED PARTIES."

THIS IS A RELEASE - READ BEFORE SIGNING

<u>Rider</u>	<u>Passenger</u>
Signature:	Signature:
Print Name:	Print Name:
Address:	Address:
City/State/Zip:	City/State/Zip:
Date:	Date:



CHAPTER EVENT RELEASE FORM FOR MINORS

Chapter Name:	Date:
Event Name/Location:	
1. I know the nature of the EVENT(S) and the Minor's experied participate, in the EVENT(S) or enter into restricted areas when ANYTHING IS UNSAFE, I WILL INSTRUCT THE MINOR TO IM THE EVENT(S) AND/OR LEAVE THE RESTRICTED AREA.	·
participation in the EVENT(S) and/or entry into Restricted Area INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS At caused by the Minor's own actions or inactions, the actions or EVENT(S) , the condition and layout of the premises and equip performing their Chapter duties: (c) there may be OTHER RISK.	
ALL SUCH RISKS, KNOWN AND UNKNOWN, AND ASSUME	SIS OR DEATH, EVEN IF CAUSED, IN WHOLE OR IN PART, BY
and lessors of the premises used to conduct the EVENT(S) , FF personal representatives, assigns, heirs, and next of kin FOR A	NY AND ALL CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON or damage to property, CAUSED OR ALLEGED TO BE CAUSED
of them from ANY LITIGATION EXPENSES, ATTORNEY FEES,	AND HOLD HARMLESS THE "RELEASED PARTIES" and each LOSS, LIABILITY, DAMAGE, OR COST THEY MAY INCUR DUE TO FIES" NAMED ABOVE, ASSERTING NEGLIGENCE ON THE PART
6. I sign this agreement on my own behalf and on behalf of the	Minor.
I HAVE READ THIS PARENTAL CONSENT, RELEASE AND WA AGREEMENT, UNDERSTAND THAT BY SIGNING IT I GIVE UP OTHERWISE HAVE TO RECOVER DAMAGES FOR LOSSES C IT VOLUNTARILY AND WITHOUT INDUCEMENT.	
Child's Name (printed):	
(Signature of Parent or Guardian)	(Printed Name of Parent or Guardian)



Name of Event:	Date:
Location:	
	ITIES conducted over the course of the above EVENT(S) and/or f the risks of personal injury which might occur during the EVENT
Both my parents and I believe I am qualified to participate in the established in connection with the EVENT ACTIVITIES . I will to be unsafe, I will immediately leave and refuse to participate.	inspect the area and equipment and if, at any time, I feel anything
2. I understand that the EVENT ACTIVITIES MAY BE VERY DANGERIOUSLY INJURED OR HURT, MY BEING PARALYZED OF	
g , , , ,	vn actions or inaction, the action or inaction of others participating IES , the condition and layout of the premises and equipment, or for conducting the EVENT ACTIVITIES .
I HAVE READ THE ABOVE ASSUMPTION OF RISK ACKNOWLE IT VOLUNTARILY.	EDGMENT, UNDERSTAND WHAT I HAVE READ, AND SIGN
(Signature of Minor Participant)	(Date)
(Printed Name of Minor Participant)	(Age)



CHAPTER INCIDENT REPORT

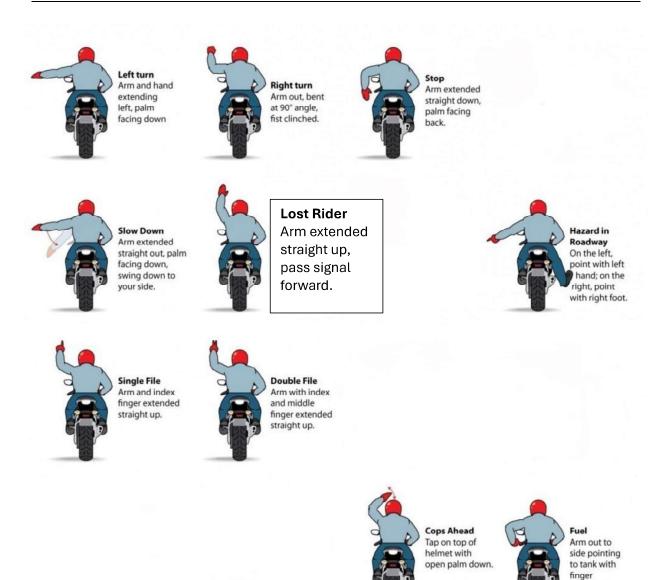
Mail or fax completed form to: Harley-Davidson Insurance 222 W. Adams St., Suite 3100

Chicago, IL 60606

FAX: 800-699	9-2142 • PHON	NE: 888-690-	5600 • EMAIL: (dealershipinsu	ırance@hdfsi.d	com				
Chapter Name	Name:				Chapter #:			Chapter #:		
Reporting Cha	Reporting Chapter Officer Name: Home Phone: Mailing Address: Work Phone:					_				
Mailing Addres										
Best time to call:					all:					
E-mail Addres	s:									
Date of Injury:										
Place of Injury	:									
Name, addres	s, ages of pers	son(s) injured:								
Names, addre	esses, telephon	e numbers of	persons who sa	w incident. At	ttach extra she	eets if necessal	у.			
When, where,	how injury occ	urred. Attach	a separate shee	t if necessary.	·					
-										
Type of injury.	Check appropr	riate boxes.								
Fatal	Head	Neck	Back/Spine	Arms	Legs	Internal Injuries	Amputation	Other		
Name, addres	s, phone numb	per of person(s) having pictures	s of accident	scene:					
Name, addres	s, phone numb	er of respond	ding police depar	tment and co	mplaint #:					

ATTACH A <u>PHOTOCOPY</u> OF EACH INJURED PERSON'S SIGNED RELEASE FORM (REQUIRED). ATTACH THE POLICE REPORT IF AVAILABLE. ONLY POLICE SHOULD TAKE WITNESS REPORTS.

COMMONLY USDED HAND SIGNALS



Additional Hand Signals

extended.

Single Finger Pointed Up (Waiving Side to Side also known as on your own)

Means: One at a time, lane change on your own.

What to do: Pass hand signal back and change lane when safe to do so.

Arm Pumping Up and Down

Means: Close ranks and tighten up the group.

Engine Problem

What to do: Point to your engine.