

Chapter Handbook.)

CHAPTER MEMBERSHIP ENROLLMENT FORM AND RELEASE

CHAPTER NAME: I EXO	<u>ma Harley Owners G</u>	<u>iroup</u>
MEMBER NAME:		
CITY:	STATE:	ZIP:
PHONE NUMBER:	E-MAIL ADD	ZIP: RESS:
MEMBER NAT'L H.O.G. NU	JMBER:	
EXPIRATION DATE OF NA	TIONAL H.O.G. MEMBERSHIP:	·
I have read the Annual Charter for H	O.G. Chapters and hereby agree to abide t	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 separat	e, independent entity solely responsible for its actions.
	- THIS IS A RELEASE, READ BEF	ORE SIGNING -
and their respective officers, director injury to me (including paralysis or defrom acts or omissions occurring durby negligence (except willful neglect) own risk in all H.O.G. activities and I the "RELEASED PARTIES" harmles activities and EVENT(S). I UNDERS' INJURY OR RESULTING DAMAGE	s, employees and agents (hereinafter, the "leath) or damage to my property occurring duing the performance of the duties of the Releating the performance of	dson, Inc., Harley-Davidson Motor Company, my Chapter RELEASED PARTIES") shall not be liable or responsible fouring any H.O.G. or H.O.G. chapter activities and resulting eased Parties, even where the damage or injury is caused embers and their guests participate voluntarily and at their ng out of the conduct of such activities. I release and hold roperty which may result from my participation in H.O.G. NOT TO SUE THE "RELEASED PARTIES" FOR ANY & FROM, OR IN CONNECTION WITH, THE & OR CONDUCTING SAID EVENT(S).
	WAIVER OF RIGHTS UNDER STA	TE STATUTES
_	owing from any state statute which would no to, Section 1542 of the California Civil Code	egate or limit the scope of this Release and Indemnification which provides:
<u> </u>	I to the claims which the creditor does not ki hich if known to him must have materially af	now or suspect to exist in his favor at the time of executing fected his settlement with the debtor."
By signing this Release, I certify that representations made by the "RELEA		nd it and that I am not relying on any statements or
		DATE:
WITNESS:		DATE: E:
(Dues not to exceed the maximum	m amount prescribed in "Appual Charte	er for H O G. Chapters" as contained in the H O G

RETURN THIS FORM TO YOUR CHAPTER