

**CHAPTER MEMBERSHIP
ENROLLMENT FORM AND RELEASE**

PLEASE CHECK ONE

_____ RENEWAL
_____ NEW
_____ LOH

CHAPTER NAME: **TUSCARAWAS COUNTY HOG CHAPTER #1577**

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBER: _____ EMAIL ADDRESS: _____

NATIONAL H.O.G. NUMBER: _____ EXPIRATION DATE: _____

I have read the Harley Owners Group Charter for local chapters and hereby agree to abide by it as a member of this dealer sponsored local chapter.

I recognize that while my Local 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 Local 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 during any H.O.G. or H.O.G. chapter activities, 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 my 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 DAMAGE TO MYSELF OR MY PROPERTY RESULTING FROM, OR IN CONNECTION WITH, ANY H.O.G. or H.O.G. CHAPTER ACTIVITIES OR EVENTS.

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: _____

WITNESS: _____ DATE: _____

LOCAL DUES PAID \$: _____ RECEIVED BY: _____

(Dues not to exceed maximum amount prescribed in "Charter for Local Chapters",
as contained in the H.O.G. Chapter Handbook.)

RETURN THIS FORM TO YOUR LOCAL CHAPTER