



District 28
American Legion Riders
Department of California

P.O. Box 992
Salinas, CA 93902



Membership Application

www.district28americanlegionriders.us

Name: _____

Nickname: _____ DOB: _____

Address: _____ City, State, ZIP: _____

Phone # Home () _____ Cell () _____ Other () _____

Email: _____

District # _____ Post # _____ Status: Veteran Auxiliary SAL

Bike Info: Make _____ Model _____ CC _____

RELEASE – PLEASE READ BEFORE SIGNING

I agree that the American Legion and or the American Legion Riders shall not be responsible for damage to property or any injury to person including myself during any Legion Riders activities, even where the damage or injury is caused by negligence (except willful neglect). I understand that and agree that all Legion riders members and their guests participate voluntarily and at their own risk in all Legion Riders activities, I release and hold the Legion Riders officers and the American Legion harmless for any injury or loss to my person or property which may result there from. I understand that this means that I agree not to sue the American Legion officers and the American Legion for any injury resulting to myself or my property in connection with any Legion Riders activities.

I certify that I have a valid motorcycle driver’s license and proper insurance

Signature: _____ Date: _____

CA AL Membership No. _____ Post No. _____

Submit : **(a)** this application and **(b)** a check for \$85.00 payable to District 28 American Legion Riders To: ALR Membership Officer in person or mail to ALR, P.O. Box 992, Salinas CA 93902, **before/at your first meeting.** The \$85 covers your first year ALR dues (\$20.00) and a donation (\$65.00) for the use of the copyrighted three piece patch set (patches must be returned if/when membership is terminated – cost is not refunded).

Still Serving America - Riding with Pride