



**WINNIPESAUKEE  
HARLEY OWNERS GROUP  
CHAPTER # 2529**

**MEMBER PROFILE**

**PLEASE FILL OUT BOTH SIDES!**

**NAME:** \_\_\_\_\_

**Mailing  
Address:** \_\_\_\_\_  
\_\_\_\_\_

**CHAPTER MEMBER SINCE (YEAR):** \_\_\_\_\_ **OR NEW MEMBER?**

**Email address for newsletter.** \_\_\_\_\_

**Would you be interested in taking an Experienced Rider  
course if offered through the HOG chapter? YES**  **NO**

**Annual Chapter Membership Dues:**

**Renewing Member: \$ 18.00**

**New Member: \$ 24.00**

**Make Check Payable to: Winnipесаaukee H.O.G. Chapter #2529**

**Complete all portions of this member profile and the release  
form on other side.**

**Enclose the appropriate fee and mail to the Chapter Membership  
Coordinator:**

**Fran Maineri  
380 Pinnacle Hill Road  
New Hampton, N. H. 03256**

Office Use Only

HED \_\_\_\_\_ per info \_\_\_\_\_ Ck No \_\_\_\_\_ Bank \_\_\_\_\_ Receipt \_\_\_\_\_ Processed \_\_\_\_\_  
Enc. MC \_\_\_ Re \_\_\_\_\_ Rocker (new) \_\_\_\_\_

**CHAPTER MEMBERSHIP  
ENROLLMENT FORM AND RELEASE**

CHAPTER NAME: **WINNIPESAUKEE H.O.G. #2529 MEREDITH NH CHAPTER**

MEMBER NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ DOB \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ MEMBER NAT'L H.O.G. NUMBER: **US**

EXPIRATION DATE OF NATIONAL H.O.G. MEMBERSHIP \_\_\_\_\_

I have read the Annual Charter for H.O.G. Chapters 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 \_\_\_\_\_

WITNESS SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

LOCAL DUES PAID \$ \_\_\_\_\_ DATE \_\_\_\_\_

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

**RETURN THIS FORM TO YOUR CHAPTER**