

## The American Legion Riders

## Post 91, Chandler, AZ <u>Member Information Form/Application for Membership</u>

About You: Complete this section in its entirety.

	First Manie:	
Nickname/Rider Name:		
Home Address:		Apt:
City:	State	e: Zip:
Home Phone: ()	Cell P	hone: ()
Wife/Husband:		
Emergency Contact Name: $\frac{1}{Th}$	is is who we would contact should something	AL/SAL/Aux Member#: Phone: () g happen to you.
		the ALR. Cross it out if you will be a passenger Displacement:
apply to you, and sign and date BOTH secti	ons. If you do not own a motorcycle, also put the motorcycle listed above is registered	w, draw a large "X" through the statement that does not t a large "X" through the " <i>About your bike</i> " section. <b>d in my name and in accordance with state, city,</b>
and/or local licensing and registra myself, my passengers, and my requirements. I also certify that I Temporary Instruction Permit in complete, and submit a new Meml "I am joining as a passenger of th	motorcycle which meets at least the carry a valid driver's license with eit accordance with state, city, and/or l ber Information Form."	hat I carry property and liability insurance for e minimum state, city, and/or local insurance her a cycle endorsement or a valid Motorcyclist local laws. If my status changes, I will request, 

ALR Membership Number: