

Rider Sign-up

2018 Howard E. Vander Clute, Jr. Memorial Motorcycle Ride

Leavenworth, KS, VFW Post 56
519 Cherokee St, Leavenworth, KS 66048
July 21, 2018



PERSONAL INFORMATION

Rider's Full Name _____

Street Address _____

City/State/Zip _____

E-mail _____ Phone _____

Passenger's Full Name _____

VFW Post/Auxiliary # _____ Not a VFW/Aux member _____

REGISTRATION FEE (Free to active duty military) \$15.00 Per Rider _____

(Free for new members to VFW or Auxiliary) \$10.00 Per Passenger _____

(New member equates to joining at time of registration) TOTAL _____

PAYMENT: Mark one - Mastercard Visa Discover Amex Check Enclosed

Card Number _____ Expiration Date _____

Name on Card _____

RIDER/PASSENGER RELEASE - As a condition of my voluntary participation in the Howard E. Vander Clute, Jr. Memorial Motorcycle Ride, and on behalf of myself and my heirs and assigns, I hereby release and discharge the Veterans of Foreign Wars of the United States, their officers, employees and agents and its affiliated organizations and their respective officers, employees and agents from any and all claims, demands, damages or liabilities arising from injuries to my person or property as the result of participating in the Ride.

I currently hold a valid driver's license with an endorsement to operate a motorcycle, and I have comprehensive motor vehicle liability insurance covering the vehicle, which I will be operating in the Ride.

I will abide by all laws relating to the ownership and operation of motorcycles in all applicable jurisdictions while participating in the Ride.

Rider Signature _____ Date _____

Passenger Signature _____ Date _____

Please complete and mail this form to Programs Department, VFW National Headquarters, 406 West 34th St., Kansas City, MO 64111.

All net proceeds from the Ride will be donated to the VFW's Veterans & Military Support Programs for support of the military and their families.