



Membership Application

A Riding Club of San Diego – www.redhotriders.com

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NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

Phone: Home (____) _____ Work: (____) _____

E-Mail Address: _____

Profession: _____ AMA#: _____ Expires: _____

Primary MOTORCYCLE: (Make, Model, Year)

Other Motorcycles: (Make, Model, Year)

Contact in Case of Emergency:

Name:

Telephone:

Red Hot Riders, Inc. members voluntarily participate in Club activities and do so at their own risk. The Red Hot Riders, Inc. are released and held harmless for any injury or loss incurred by a member or to a member's personal property which may have occurred as a result of participating in Club activities.

Club membership is based on the current calendar year. Send this application with \$25 annual dues to:

Kyle Chandler
1400 Rubinstein Ave.
Cardiff By The Sea, CA 92007

Please make your check payable to Red Hot Riders, Inc.

I understand that the Red Hot Riders, Inc. cannot assume responsibility for any aspect of my safety and that if I participate in any Club event, I do so voluntarily on my own assessment of my ability, the routes, and all facilities, and conditions, assuming all risk; and I release and hold the Red Hot Riders, Inc., its officers and members, and the House of Motorcycles, harmless for any injury or loss to my person or property which may result there from. I also certify that I am in compliance with my state's financial responsibility laws regarding the carrying of proper insurance.

Your Signature _____

Date _____

Chapter President
Approval Signature _____

Dues Paid _____

Date _____

Date _____