



American Legion Riders
Department of Missouri
Legacy Ride - 2024



2024 LEGACY RIDE
June 28 - 30, 2024

Participant Registration/Release Form-Page #1
Motorcycle Accident Waiver, Release of all Liability and Assignment of Claims

As Consideration for being allowed to participate in the event described below, I agree:

1. I acknowledge that motorcycle activity is a potentially hazardous activity that can test a person's physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include but are not limited to, those caused by terrain, facilities, temperature, weather, condition of riders' equipment, vehicular traffic, actions of other people including, but not limited to organizers, participants, volunteers, spectators, agents, The American Legion and its officers, NEC-men, directors and employees. Thereby assume all the risks of participating, viewing and/or volunteering in the event(s). I realize that liability may arise from negligence or carelessness on the part of the persons or entities organizing or conducting the event(s) and hereby release them of all possible liability. **I certify I am at least 18 years old.** I promise not to sue and agree to pay all court costs and all attorney fees that result from my actions, civil or otherwise
2. I certify that I am physically fit with no known physical or mental impairments and have prepared for participation in the event(s). I acknowledge that this Accident Waiver and Release of Liability form will be used by the event holders, sponsors and organizers of the event(s), in which I may participate and that it will govern my actions and responsibilities at said events. I certify that I am not under the influence of any narcotic, alcohol or other drug which may impair my understanding or judgment and that I will not at any time during the event(s) operate my motorcycle under the influence of any narcotic or drug. I certify that I have fully adequate insurance to cover all medical claims, the motorcycle and any other equipment and damage or liability I may ultimately be found responsible for, during all travel to the point of my entry into the event(s), the end of the event(s), and the return to my destination. I further certify that I have all the insurance required by law and I am licensed and competent to operate a motorcycle in a safe manner and my license has all the motorcycle endorsements and certificates as required by my state of residence.
3. In consideration of my being permitted to participate in the event(s), I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me during the event(s) or during my travel to and from the event(s), **THE FOLLOWING ENTITIES OR PERSONS: The American Legion, its Officers, NEC-men, directors, employees, ride organizers, sponsors, representatives, agents, volunteers and (B) indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of any of my actions during the event(s).** **Accordingly, I do hereby release and discharge The American Legion, its officers, NEC-men, directors, employees, event organizers, sponsors, representatives, officers and agents, from all claims, demands, and causes of action of every kind whatsoever for any death, damages, and/or injuries which may result from my participation in the event(s). This shall be construed broadly to provide a release and waiver to the maximum extent permissible under the applicable law.**
4. I hereby consent to receive medical treatment, which may be deemed advisable in the event of injury, accident and or illness during the event(s). I agree to pay for any and all costs related to medical response, treatment and transport on my behalf.
5. I certify that I will wear a D.O.T. approved helmet as well as any protective equipment at the event(s) that is or may be required by the United States and/or any state in which my participation occurs and that my motorcycle, helmet, and all required personal protective equipment are in safe operational condition. I agree to abide by the directions/rules given by the organizers of this event and understand that my privilege to ride may be removed without refund if I am in violation of the rules set forth or acting/performing in an unsafe manner, or any manner disruptive to the operation of the event(s). The engine displacement of my motorcycle is at least 750cc, the minimum size allowed for participation. CC less than 750cc requires prior approval.



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Participant Registration/Release Form-Page #2 Motorcycle Accident Waiver, Release of all Liability and Assignment of Claims

6. I agree to pay for all expenses (including, but not limited to lodging, food, beverages, gasoline, oil, repairs and maintenance and any other costs or expense I may incur) intending that The American Legion shall be totally free of such costs and expense.
7. As additional consideration for being allowed to participate in the event(s) described below, I hereby assign to The American Legion any claim I have or might have, in contract or in tort in any way, shape, form or fashion arising out of its action, the actions of other riders or anyone that participates in or comes in contact with participants in the event(s). This assignment is intended by all parties to be a full and complete assignment of any claim I have against The American Legion and its NEC-men, officers, directors, employees, event organizers, sponsors, volunteers, representatives and agents, or may have against entities and individuals listed in the paragraph whether directly or indirectly through third parties. The intent of the parties is that The American Legion and NEC-men, officers, directors, employees, event organizers, sponsors, volunteers, representatives and agents shall be liability free regarding anything in any way connected with the event(s).
8. I hereby release The American Legion from any and all claims based upon or arising out of the use, reproduction, distribution, display or performance of all or any part of the photographs or recordings, or any derivative thereof, including any claim of invasion of privacy or right of publicity.

I HEREBY CERTIFY THAT I HAVE READ BOTH PAGES OF THIS WAIVER, RELEASE AND ASSIGNMENT IN ITS ENTIRETY, AND I FULLY UNDERSTAND IT AND AGREE TO ITS CONTENTS.

COMPLETION AND SIGNATURE ON FORM INDICATES AGREEMENT TO TERMS AND CONDITIONS ON BOTH PAGES

PLEASE PRINT LEGIBLY

Date _____

Rider Name: _____ Passenger Name: _____

Address _____

Rider Signature _____ Passenger Signature _____

Post/Chapter # _____ Email Address _____

Phone _____

Your Ride (circle all that apply): 2-wheeler Trike Spyder w/trailer

What is your average miles per tank of fuel? _____

Group/Chapter/Individual you would like to ride with: _____

Are you riding the full ride (circle one) YES NO?

Riders can ride 1, 2 or 3 days, but will NOT be allowed to jump into the ride in the middle of the day. If you are going to ride, you must start with your assigned group in the morning and continue for the full day.

Day Riders, Which days are you going to ride? (circle one or two days) Friday Saturday Sunday

Cost is \$60 per rider, \$30 per passenger. Non-Participant donations can be any amount you choose. Additionally, there is a mandatory \$9 per meal. Thursday dinner, Friday, and Sat lunch so add extra \$27 for all three meals. This makes the total cost \$87 per rider (\$57 per passenger) for the three days.

Registration begin on Saturday, Feb 17, 2024. Deadline is Saturday June 1, 2024. All registration forms must be submitted by then.

Group assignments, patches and informational packets will be mailed to you prior to the ride. (make sure you have filled out and signed your form and put a check or money order for the correct amount in the envelope) Make out the check or money order to: ALR of Missouri and put "ALR MO Legacy Ride" on the memo line. Send release form and check to:

ALR MO Finance Officer
c/o Christine Sapp
608 Appaloosa Dr
Ashland, MO 65010



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RULES OF THE RIDE

All riders/passengers must present current (2024) American Legion Riders membership card AND helmet at check in. No exceptions.

All Riders and Passengers Must wear a DOT helmet during the ride. NO Novelty Helmets.

Riders can ride 1, 2, or 3 days, but will NOT be allowed to jump into the ride in the middle of the day if you are going to ride, you must start with your assigned group in the morning and continue for the full day.

Minimum Bike Size -750cc unless approved by the Ride Captain. Ride in a staggered formation, 1 – 2 second interval between bikes. Maximum 25 bike group size

Carry Cash (\$1's, \$5's and \$10's) for fuel-you will be handed the pump handle when pulling up to the fuel pump, then advised how much your gas purchase was. It will be rounded up to the nearest dollar amount (the extra will be used to fuel advance party bikes and chase vehicles). You will then pull up and give that amount to the Rider on the Advance Party. At the end of all the bikes fueling, they will go inside and pay the total bill. This will streamline the process and minimize the group's fueling time. **FUEL CREW DOES NOT GIVE CHANGE.**

No Alcohol consumed during the ride. If you are going to consume alcohol, it must be done after the group is finished riding for the day. If caught consuming alcohol during the day, you will be asked to leave the ride.

Start hydrating 24-48 hours prior to the ride starting. Drink plenty of water during the ride.

Each Group will have a Leader. The Group Leader will oversee their group and will ensure that all riders are complying with the rules. Any complaints or comments should be taken up with the Group Leader.

Please be courteous of your fellow riders, especially those around you.

All lunches at the different Posts are provided to Participants in the Ride and paid for through your prior payment at registration. Payment will be made to hosting Posts after the run. Tips are still appreciated for these posts helping us out.

Riders Meetings will start promptly at 8:30 am each day (unless otherwise noted by Ride Captain). All Riders must be in attendance for the briefing for the day's ride.

Completely fill out your medical form. Keep it on your bike or person so if you become incapacitated, we have that information for the medical personnel. It's a good idea to provide a copy in sealed envelope to your Group Leader as well in event of an emergency.



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Recommended Packing List

Normal Riding Gear:

- Helmet (DOT approved)
- Personal Protective Gear (jacket, gloves, chaps, boots, etc.)

Easy to get stuff:

- MO ALR 2024 Legacy Ride handout package
- Missouri Map (or up to date GPS system)
- Sun screen
- Money
- Camera
- Rally Flag/Vietnam Veteran and Memorial search flag
- Sun Glasses
- Prescription glasses/contact lens (w/ solution)
- Microfiber rags
- Medications
- Snacks
- Water Bottle
- Legion Headgear and Vest

Clothing for three-day ride, plus personal toiletry kit and wet weather gear

“Just in case” items:

- Reflective vest
- Motorcycle tools
- Tire repair kit
- Masking and duct tape
- Safety wire
- Quart of oil
- Zip tie

Fill out the form, print *two* copies, double sided and cut along the outer dotted line. One copy will be provided to your road captain and you will be given a plastic sleeve for the other.



INSURANCE INFORMATION

COMPANY POLICY # PHONE

MEDICARE # _____

PHYSICIANS PHONE

DR. ()
 DR. ()
 DR. ()

PLEASE CONTACT THE PERSON(S) OR ORGANIZATION(S) LISTED BELOW FOR INFORMATION ON LIVING WILL OR DONOR INFORMATION

NAME _____
 PHONE () _____
 NAME _____
 PHONE () _____

PHARMACIST _____

PHARMACY LOCATION _____

PHONE () FAX ()

BLOOD TYPE HEIGHT WEIGHT

DATE OF YOUR LAST TETANUS SHOT / /

DATE OF YOUR LAST PNEUMONIA SHOT / /

DATE OF YOUR LAST FLU SHOT / /

STOCK #: 30-082 ARTWORK #: 41MEM0711

NAME _____

ADDRESS _____

CITY STATE ZIP

PHONE () _____

DATE OF BIRTH MALE FEMALE

RELIGION _____

DATE THIS MEDICAL FORM WAS COMPLETED / /

+ EMERGENCY MEDICAL RECORD +



AMERICAN LEGION RIDERS

(317) 630-1265

www.legion.org/riders

ATTENTION POLICE & MEDICAL PERSONNEL

IN CASE OF EMERGENCY PLEASE NOTIFY

NAME _____

ADDRESS _____

CITY STATE ZIP

PHONE () _____

LIVING WILL? YES NO DONOR? YES NO

DURABLE POWER OF ATTORNEY FOR HEALTH CARE? YES NO

MOTORCYCLE HAND SIGNALS



Left turn
Arm and hand extending left, palm facing down



Right turn
Arm out, bent at 90° angle, fist clenched.



Stop
Arm extended straight down, palm facing back.



Speed Up
Arm extended straight out, palm facing up, swing upward.



Slow Down
Arm extended straight out, palm facing down, swing down to your side.



Follow Me
Arm extended straight up from shoulder, palm forward.



You Lead/Come
Arm extended upward 45°, palm forward pointing with index finger, swing in arc from back to front.



Hazard in Roadway
On the left, point with left hand; on the right, point with right foot.



Single File
Arm and index finger extended straight up.



Double File
Arm with index and middle finger extended straight up.



Comfort Stop
Forearm extended, fist clenched with thumb up and down motion.



Refreshment Stop
Fingers closed, thumb to mouth.



Turn Signal On
Open and close hand with fingers and thumb extended.



Pull Off
Arm positioned as for right turn, forearm swung toward shoulder.



Cops Ahead
Tap on top of helmet with open palm down.



Fuel
Arm out to side pointing to tank with index finger extended.

American Legion Riders of MO

Hotel Listing

Missouri Legacy Run June 28 – 30

DRURY INN	3601 S Rangeline Rd	25 Rooms 2 Queen Beds each
June 27th	Joplin, MO.	\$135 plus tax, must reserve by
	Nina in Group Sales 800.436.1169	27 May 2024
	Hotel Direct 417.781.8000	

<https://www.druryhotels.com/bookandstay/newreservation/?groupno=10099891>

Holiday Inn	3402 Arizona Ave	30 Rooms 2 Queen Beds each
June 27th	Joplin, MO.	\$139 plus tax, must reserve by
	Madison in Group Sales	27 May 2024
	417.624.9000	

Best Western	3508 S Rangeline Rd	30 Rooms 2 Queen Beds each
June 27th	Joplin, MO.	\$135.02 includes tax, must
	Reservations are under	Reserve by 27 May 2024
	“American Legion Riders of Missouri”	
	417.781.6776	

Oasis Hotel & Convention	2546 North Glenstone Ave	75 Rooms / 30 Deluxe Queen
June 28 th	Springfield, MO.	25 Queen poolside
	“American Legion Riders of Missouri”	4 King poolside
	Booking ID #355058	16 King courtyard
	417.866.5253	\$112 plus tax must reserve by
		June 1 st 2024

