



## Road Captain Information

### Middle Tennessee HOG Chapter

Calendar year applying for: \_\_\_\_\_

Date: \_\_\_\_\_

First time Applicant: yes / no

Returning Road Captain: yes / no

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_

Home Phone : \_\_\_\_\_ Alternate phone : \_\_\_\_\_

e-mail: \_\_\_\_\_

HOG Member # : \_\_\_\_\_ Expires: \_\_\_\_\_

Middle TN Member #: \_\_\_\_\_

Driver's Lic.# & State : \_\_\_\_\_ Motorcycle Endorsement: yes / no

Motorcycle Ins. Co. : \_\_\_\_\_ Policy #: \_\_\_\_\_

Attended and passed Motorcycle Safety Course: yes/ no

Name of Course: \_\_\_\_\_ Date/Attended: \_\_\_\_\_

***Please attach a copy of your Driver's License, Ins. Card and Safety Course Certification***