

**Milwaukee Chapter
Road Captain Information Form**

Name: _____

Nickname: _____

Phone:

Home: _____ Work: _____

Cell: _____ Pager: _____

Submitted by: _____ Date: _____

Have you completed a "Motorcycle Safety" or "Rider's Edge" course? YES NO

Do you have a "CB" on your bike? YES NO

Do you have "flag holders" on your bike? YES NO

Have you completed "Accident Scene Management"? YES NO

When (month and year)? Basic: _____

Advanced: _____

Refresher: _____

E-mail address: _____

Approved: _____ Date : _____

Remain on List: _____ Date: _____