

Milwaukee Chapter Road Captain Application Form

Date: _____ (Please attach photo)

Name _____

Nick Name _____

Address _____

Phone:

Home: _____

Work: _____

Cell: _____

Have you completed a "Motorcycle Safety" or "Rider's Edge" Course Yes
No

Milwaukee Chapter Member since: _____

Years Riding _____

Do you have a CB Radio on your bike? Yes No

Do you have Flag Holders on your bike? Yes No

Have you completed a "Bystander Assistant Class? Yes No

When (Month & Year Basic _____

Advanced _____

Refresher _____

E-Mail Address _____