

Delmarva HOG Reward Points

Road Captains/Ride Leaders, please have your riders/passengers/volunteers Chapter Members Only clearly print their last name, first name so they can get credit for participating in the points program.

Date of Ride/Event: _____ Road Captain/Ride/Event Leader: _____

Name of Ride/Event: _____ Sweep: _____

Last Name (Please Print)	First Name (Please Print)