

COMMANDER'S MOTORCYCLE RIDER AGREEMENT

This form is subject to the Privacy Act of 1974 (5 U.S.C. § 552a). See USASOC Reg 385-1 for additional information regarding this form.

To be completed by all Soldiers. The form will be updated when changes in status occur and kept on file until the Soldier leaves the unit. The commander is accountable for record-keeping of this form.

1. Date

2. Rider's Name (Last, First, MI):

3. Rank:

4. Unit:

5. Driver License Information: Expiration Date: _____

6. Insurance Information: Policy #: _____

Motorcycle Endorsement (Y/N):

Issuing State: _____

Company: _____

7. Motorcycle Information: Make: _____

8. Riding Experience: Total Experience: _____

Model: _____

Year: _____

Current Type (Dirt, Cruiser, Sport, etc): _____

9. Rider Training - Training Completed and Completion Date (attach a copy of the certificate for the highest level completed):

Basic Riders Course: _____ (date) _____

Experienced Riders Course: _____ (date) _____

Sport Bike Course: _____ (date) _____

Motorcycle Safety Foundation Certified Rider Coach: _____ (date) _____

10. The rider received a safety brief on:

_____ . The briefing included the requirement to wear personal protective equipment (reflective outerwear, boots or over-the-ankle shoes, full-fingered gloves, long-sleeve shirt or jacket, long pants, protective eyewear, and a DOT approved helmet) at all times regardless of lesser State and or local requirements; and was made aware of the highest risk areas and times for riding, and motorcycle accident data, and unit/installation mentorship programs or clubs.

11. Commander's Initial Risk Assessment of the Rider (multi-factor analysis i.e., recent experience, driving record, etc):

Low

Moderate

High

Extremely High

12. Controls Implemented to Reduce Risk Level - Assigned to _____

for Implementation:

13. Commander's Residual Risk Assessment of the Rider:

Low

Moderate

High

Extremely High

It is the responsibility of not only the Unit Commander to ensure that unit motorcyclists reduce the risk to themselves, but also the rider, the rider's supervisors, and those who work with them, by fostering an environment that is conducive to safety mentorship. Recognizing the potential for an accident and taking steps to prevent the accident is the goal of the accident loss prevention program and this agreement.

I (rider) _____ agree to assess all risks prior to and during my ride. I will abide by all laws, regulations, rules of conduct. To ensure the trust of my commander places in me is well founded, I will ensure all documentation is current and available at all times, and will inform my commander any time my status as a rider or the information on this form changes. I understand the requirement to wear the required personal protective equipment at all times regardless of lesser State and/or local requirements. I understand that the failure to wear this equipment significantly increases the chance of severity of injury and or death, and can result in a line-of-duty NO determination and substantial financial burden on myself and/or surviving dependents.

I (commander) _____ will ensure all regulatory guidance regarding motorcycle safety is understood by the riders under my command. I will take all necessary action to ensure unit riders comply with regulatory requirements. I will always be available to mentor and assist the Soldier signing this agreement.