



2008 H.O.G.® MILEAGE PROGRAM

– Official Guidelines –



Mileage Program (established January, 1995)

A H.O.G. Mileage Program pin and patch will be sent to all H.O.G. members upon enrollment in the program. After enrollment, additional awards can be earned by achievement of the mileage levels listed on the opposite side of this form.

OFFICIAL GUIDELINES

Eligibility to participate includes the following:

- Active H.O.G. member (full or associate)
- **EACH MOTORCYCLE MUST BE ENROLLED IN PROGRAM PRIOR TO ACCUMULATING MILES**
- Motorcycle must be a Harley-Davidson® or Buell® (either owned by you or a H.O.G.® Fly & Ride rental)
- Each change of vehicle must be registered in the program indicating the ending mileage
- Passengers are also welcome to participate in the H.O.G. Mileage Program. The passenger **must also be an active H.O.G. member**, and enrollment is to be documented on the SAME form with their sponsoring rider. Call your National H.O.G. office at the number listed below to join.

Those listed as a “passenger” on a form, but who are also “riders”, may submit a separate enrollment form if they would like to accumulate miles as a “rider”. (However, mileage accumulated on one vehicle cannot be shared with another rider, i.e., the same mileage cannot be reported twice for two rider awards.)

- **ALL FORMS MUST BE ENDORSED BY A HARLEY-DAVIDSON DEALER**
- Each form must include actual odometer readings and VIN # (must indicate either miles or kilometers)
- Please allow 6-8 weeks for processing.

PLEASE MAIL OR FAX:

(all forms, except Canadian forms,
should be mailed to the United
States address)

United States

Harley Owners Group
H.O.G. Mileage Program
P.O. Box 453
Milwaukee, WI 53201
FAX: 414-343-4515
PH: 800-258-2464

Canada

Harley Owners Group
H.O.G. Mileage Program
830 Edgeley Blvd.
Concord, Ontario, Canada L4K 4X1
Fax: 905-660-3372
PH: 800-668-4836



2008 H.O.G.® Mileage Form



MEMBER INFORMATION:

RIDER NAME _____ H.O.G. # (including Country Code)

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Address _____

City/State/Zip or Postal Code _____

PASSENGER NAME _____ H.O.G. # (including Country Code)

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Address _____

City/State/Zip or Postal Code _____

Please check the appropriate level for which you are applying:

RIDER: <input type="checkbox"/> Enroll <input type="checkbox"/> 10,000/16,100 km <input type="checkbox"/> 125,000/201,250 km <input type="checkbox"/> 25,000/40,250 km <input type="checkbox"/> 150,000/241,500 km <input type="checkbox"/> 40,000/64,400 km <input type="checkbox"/> 175,000/281,750 km <input type="checkbox"/> 60,000/96,600 km <input type="checkbox"/> 200,000/322,000 km* <input type="checkbox"/> 80,000/128,800 km <input type="checkbox"/> 250,000/402,500 km <input type="checkbox"/> 100,000/161,000 km* <input type="checkbox"/> 300,000/483,000 km*	PASSENGER: <input type="checkbox"/> Enroll <input type="checkbox"/> 10,000/16,100 km <input type="checkbox"/> 125,000/201,250 km <input type="checkbox"/> 25,000/40,250 km <input type="checkbox"/> 150,000/241,500 km <input type="checkbox"/> 40,000/64,400 km <input type="checkbox"/> 175,000/281,750 km <input type="checkbox"/> 60,000/96,600 km <input type="checkbox"/> 200,000/322,000 km* <input type="checkbox"/> 80,000/128,800 km <input type="checkbox"/> 250,000/402,500 km <input type="checkbox"/> 100,000/161,000 km* <input type="checkbox"/> 300,000/483,000 km*	
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NOTE: After 300,000, the award levels will remain at 50,000 increments

**Special medallions and rockers, suitable for placement on your Harley-Davidson® or Buell® motorcycle, will be awarded for each 100,000 mile achievement.*

NOTE: To convert kilometers to miles, divide kilometers by 1.61. For example, 40,250 kilometers ÷ 1.61 = 25,000 miles.

ENROLLMENT/NEW LEVEL APPLICATION: IMPORTANT – ENROLLMENT OF YOUR HARLEY-DAVIDSON OR BUELL MOTORCYCLE IS REQUIRED PRIOR TO ACCUMULATION OF MILES/KILOMETERS

VIN/Serial # _____

Starting: Miles _____ Kilometers _____ Current: Miles _____ Kilometers _____

VIN/Serial # _____

Starting: Miles _____ Kilometers _____ Current: Miles _____ Kilometers _____

VIN/Serial # _____

Starting: Miles _____ Kilometers _____ Current: Miles _____ Kilometers _____

CHANGE OF VEHICLE NOTICE:

Harley-Davidson or Buell motorcycle to be added to program:

VIN # _____

Starting: Miles _____ Kilometers _____

Previous Harley-Davidson or Buell if sold/traded:

VIN # _____

Ending: Miles _____ Kilometers _____

DEALER ENDORSEMENT (REQUIRED):

Dealership Name _____ Dealer Number _____

Dealer Signature _____ Date _____

I hereby certify that all information indicated on this form is correct.