



Date received (office use only): \_\_\_\_\_

# OREGON MOTORCYCLE ROAD RACING ASSOCIATION

## 2017 New Racer School Registration

School Date (circle one): April 28 or Summer

### 1. PERSONAL INFORMATION:

Name:	Phone: (       )
Address:	Email:
City, State, Zip:	Date of Birth:
Do you have medical insurance? *    Yes <input type="checkbox"/> No <input type="checkbox"/> _____ initial here    * Required to race with OMRRA.	
Have you road raced motorcycles before?    Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, how many years, when, with which club?	
Have you ridden at motorcycle track days before?    Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, how many, and most recently in which rider group (typically A, B, or C)?	

### 2. MOTORCYCLE INFORMATION (the bike you will race):

Year of manufacture:	Make:
Model:	Displacement:
Number of cylinders:	

### 3. ALSO REQUIRED FOR NEW RACER SCHOOL:

- a. 2017 OMRRA Medical Form
- b. 2017 OMRRA Membership Form (check "Novice Racer" box)

4. How did you hear about OMRRA? \_\_\_\_\_

5. See [www.OMRRA.com](http://www.OMRRA.com) for information on New Racer School schedule, FAQ, and to download the OMRRA Rule Book. Stay current by following: [www.facebook.com/omrra.racing](http://www.facebook.com/omrra.racing)

6. PAYMENT (Circle One: Check / Money Order / Visa / Master Card / PayPal to omrrainfo@gmail.com):

**New Racer School Cost = \$99\*\***

Includes: Thursday classroom, written test, and Friday on-track riding sessions including race simulation.

\*\* OMRRA Annual Race Membership is a separate charge (\$100) and form.

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ 3-digit Security Code: \_\_\_\_\_

Signature: \_\_\_\_\_

Check or money order (US\$) to: OMRRA, PO Box 6388 Portland, OR 97228 USA. Refunds must be requested in writing.

**Refund Policy:** Fully refundable if canceled 7+days in advance. 50% refundable if canceled less than 7 days in advance. OMRRA New Racer School runs rain or shine.

For your information security, please **do not email this form to OMRRA**. Fax or post only.

Office Fax: 1- (503) 868-6000

Office Phone: (503) 841-6185

Email: info@omrra.com

Oregon Motorcycle Road Racing Association - PO Box 6388 Portland, Oregon 97228 - [www.omrra.com](http://www.omrra.com)

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