

Motorcycle Operator Information Sheet

Rank:

First Name:

Last Name:

Work Section:

Work Phone Number:

Email Address:

Age Group

18-24

25-35

Over 35

Motorcycle license or Permit? What state? :

Date of Purchase:

Brand of Motorcycle:

Model of Motorcycle:

Type of Motorcycle

Touring 1100-1800cc

Sport Touring 1100-1800cc

Super Sport 650-1100cc

Sport Unclad 650-1100cc

Dirt Bike 50-1800cc

Standard 650-1800cc

Intro Bike 50-1800cc

Scooters 50-650cc

Registered on-Base? : No

BRC Completion Date:

ERC / ARC Completion Date: