



This form must be completed in its entirety. If you have mailed in or paid online, you MUST pick your form up at the registration area. If paying at the track, you may print and complete this form before arriving to save time.  
 Everyone must pay a \$5 gate fee and receive an armband before entering the track area.

Tech Number \_\_\_\_\_

## 2010 Racer's Licensing Clinic Registration:

Sun, May 23      Sat, Jun 12      Sat, Aug 14      Sun, Oct 10

Normal TD Class (circle one): Street/Novice - Intermediate - Expert

Rider Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ (Cell): \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact (Name): \_\_\_\_\_

(Phone): \_\_\_\_\_

Motorcycle (Year, Make, Model): \_\_\_\_\_

Riding Experience (yrs): \_\_\_\_\_

If your bike is pre-numbered, what is your number? \_\_\_\_\_ (Example: Y234 = Yellow 234)

\*\*\*\*\* PRICING \*\*\*\*\*

No Late or At The Track Registrations

\_\_\_ MCRA Members \$170.00 (2010 MCRA membership required. This WILL be checked.)

\_\_\_ NON MCRA Members \$195.00 (MCRA membership is included)

If your bike is pre-numbered, what is your number? \_\_\_\_\_ (Example: Y234 = Yellow 234)

To register by mail, print and send completed form & payment to:

MCRA Racer's Clinic, P.O. Box 16591, St. Louis, MO 63105

MUST be postmarked 14 days prior to the event

Online Registration & Payment (PayPal): [www.mcraracing.com](http://www.mcraracing.com)

NOTE: Safety equipment required (Street/Novice, Intermediate & Expert): Full Leathers or Aerostitch type suit with either one piece or zip-together two-piece design, Full-Face Helmet, Leather Boots and Gauntlet Style Gloves. ALL bikes and equipment MUST pass an on-site safety/tech inspection before being permitted on the track. This is a RAIN or SHINE event. NO REFUNDS.

By completing this form I agree that I have read the Track Day Handout and agree to comply with any guidelines for track day usage.  
<http://www.mcraracing.com/documents/TDhandout.pdf>

(Office use only – to be completed by registration official)

MCRA Membership Checked \_\_\_\_\_

Rider Name: \_\_\_\_\_

Amount Paid: \$ \_\_\_\_\_ .00 Paid By: Cash Check # \_\_\_\_\_ Recorded by: \_\_\_\_\_

Take this form to The track. It MUST be used for registration and turned into the tech inspector.

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Clinic

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