

Transponder ID _____

Bike Number _____

2017 Texas Cross Country Racing Association

Date _____

Name: _____ Date of Birth _____ Age _____

Address: _____ New? Y / N

City: _____ State: _____ Zip: _____

Phone: _____ New? Y/N Email Address: _____ New? Y / N

Bike Brand _____ Size – CC's _____ New Bike? Y / N

Emergency Contact: _____ Phone Number: _____

Number Request 1st choice _____ 2nd choice _____ 3rd choice _____

May we give your mailing address to area motorcycle shops and non-TCCRA race promoters'? Y / N

May we give your phone number to TCCRA members who wish to contact you? Y / N

CLASSIFICATIONS

EXPERT	INTERMEDIATE	AMATEUR	OTHER
Open (Nxx)	Open (N3xx)	Open (N6xx)	PRO (Pxx)
Lite (Jxx)	Lite (J3xx)	Lite (J6xx)	
Over 30* (Xxx)	Over 30* (X3xx)	Over 30* (X6xx)	
Over 38* (Exx)	Over 38* (E3xx)	Over 38* (E6xx)	
Over 45* (Hxx)	Over 45* (H3xx)	Over 45* (H6xx)	
Over 52* (Yxx)	Over 52* (Y3xx)	Over 52* (Y6xx)	Night Team (xx)
	Over 59* (S3xx)	Over 59* (S6xx)	Night Ironman
		Sportsman B (Bxx)	Vintage 20 (Vxx)
Mini* (Mxx)	Mini* (M3xx)	Mini* (M6xx)	
Ladies (Lxx)	Ladies (L3xx)	Ladies (L6xx)	
Ladies Over 30* (Wxx)	Ladies Over 30* (W3xx)	Ladies Over 30* (W6xx)	Pit Mom (W8xx)
Pee Wee 50* (Kxx)	Pee Wee 50* (K3xx)	Pee Wee 50* (K6xx)	6 & Under Beginner* (K8xx)
Pee Wee 65* (Zxx)	Pee Wee 65* (Z3xx)	Pee Wee 65* (Z6xx)	65 Beginner* (Z8xx)

*Proof of Age is required for ALL age classes, Mini's and Peewee's.

*****SIGNATURE REQUIRED BELOW*****

I hereby agree to conform to and comply with the rules set forth by TCCRA. I further agree to hold harmless the TCCRA and its Officers for any loss or injury to myself or property resulting from any accident in which I may become involved by reason of participation in their contests. This constitutes an expressed acknowledgment and voluntary assumption of the risks associated with Cross Country Motorcycle Racing.

Date _____

Member Signature _____

FOR ALL RIDERS UNDER THE AGE OF 18

Being the legal parent and/or guardian of the above named minor, I hereby approve of and agree to the participation of _____ in the contests of TCCRA. I agree to the release clause listed on this page completely and without reservation.

Date _____

Parent/Guardian Signature _____

Racing Membership Fee - \$25.00** (1st class)

Associate & Pit Mom Membership Fee** - \$15.00

****Enclose check or money order payable to TCCRA and Mail Membership Form to:**

Julie Baula 1510 N. Maxey, Sherman, TX 75090 (903) 744-3831