Motorcycle Operator Information Sheet

Rank:

First Name:

Last Name:

Work Section:

Age Group ____18-24 ____25-35 ____Over 35

Brand of Motorcycle:

Model of Motorcycle:

Type of Motorcycle

____Sport Touring 1100-1800cc

____Super Sport 650-1100cc

____Sport Unclad 650-1100cc

____Dirt Bike 50-1800cc

____Standard 650-1800cc

____Intro Bike 125-500cc

____Scooters 50-650cc

____Other

License or Permit?

Registered On –Base?

State Where Licensed:

Date of Purchase:

BRC Date:

BRC On-Base or Off-Base?

ERC Date:

Sport Bike Course Date:

Work Phone Number:

Email: