



OREGON MOTORCYCLE ROAD RACING ASSOCIATION
 2011 Race Registration Form
 Vintage Weekend

Event Dates: June 25-26, 2011

Personal Information:

Name:		Phone: ()
Address:		Email:
Do you have medical insurance?*		Yes <input type="checkbox"/> No <input type="checkbox"/> _____ initial here
		* You must have medical insurance to race at PIR.
AMB #	Bike #	Race License Organization:
Sponsors: (if nothing has changed, leave blank)		

Which Vintage classes are you pre-entering?

Check Box If Racing	Race Class	Bike make	Model	Year	Displacement
	2V Saturday				
	2V Sunday				
	5V Saturday				
	5V Sunday				
	Open Vintage Saturday				
	Open Vintage Sunday				
	Open Dinosaur Saturday				
	Open Dinosaur Sunday				

* Saturday and Sunday are considered separate races. Tally each day as a separate class below.

* If you race Clubman classes, please fill out the normal OMRRA entry form as well. Add those classes as last classes.

Entry Fees:

1st Class	\$125.00	\$	Pre-entry must be received by Monday, June 20 to avoid a \$50 post-entry fee.
2nd Class	\$90.00	\$	
3rd Class	\$75.00	\$	
4th Class	\$50.00	\$	Registrations accepted via fax until Thursday, June 23, after which you must post-enter at the track the day of the event.
5th Class+	\$25.00 ea.	\$	
TOTAL		\$	Practice Saturday and Sunday is included with your first class entry fee.

Would you like to donate to the OMRRA Injured Riders Fund? Amount _____ Thank you!

Payment Information:

Card Type: _____ (Visa or MC only) Card #: _____

Signature: _____ Exp. Date: _____

Or send check or money order (US Dollar only) to: **OMRRA** PO Box 6388 Portland, Oregon 97228

Refunds must be requested in writing.

Fax: (503) 961-8489

Office Phone: (503) 841-6185

Email: info@omrra.com