**OSCS SATURDAY PRACTICE**

**DATE\_\_\_\_\_\_\_\_\_\_\_\_ OSCS MEMBERSHIP #\_\_\_\_\_\_\_\_\_\_\_\_**

**AMA MEMBERSHIP #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AMA EXPIRATION DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_BIKE BRAND/SIZE\_\_\_\_\_\_\_\_\_\_\_\_\_NUMBER\_\_\_\_\_\_**

**DOB\_\_\_\_\_\_\_\_\_\_\_\_\_ AGE\_\_\_\_\_ STREET ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CITY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_STATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ZIP CODE\_\_\_\_\_\_\_\_\_\_**

**PHONE # (\_\_\_)\_\_\_\_\_\_\_\_\_\_\_EMAIL ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SPONSOSR(S)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_YEARS RACING\_\_\_\_**

**450 NOV/INT/PRO**

**85 NON BEGINNER**

**+25/+30/+40**

**250/450 BEGINNER**

**65**

**250/NOV/INT/PRO**

**85 BEGINNER**

**+50/+60**

**SUPERMINI**

**51 (PEEWEE)**

**WOMEN AND SCHOOLBOY SHOULD PRACTICE WITH APPROPRIATE BIKE SIZE/AGE/SKILL LEVEL**

**ATTENTION: A SIGNED AMA RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT MUST ACCOMPANY THIS ENTRY FORM.**

**Entrants Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/Legal Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**