

MOTORCYCLE SCHOOL SUPPLEMENTAL APPLICATION

Applicant Name: _____

Date and time of event: _____

Legal name and address of your group/organization: _____

1. Does your "school" have a website? ☐ Yes ☐ No

If yes, please provide website address URL: _____

2. Please describe the school operations in detail (attach schedule): _____

3. What experience do and/or your instructors have in this area? _____

4. Do you allow minors (under age 18) to participate? ☐ Yes ☐ No

If yes, please describe. _____

5. Describe technical inspection of vehicles: _____

6. Detail the rules that would be followed for your school (attach copy of rules): _____

7. Estimated number of riders participating in the school: _____

8. What are the maximum speeds, by category? _____

9. Is the school open for spectator viewing? ☐ Yes ☐ No

If yes, please give estimated # of spectators: _____

10. Describe any liability or participant accident medical expense claims sustained by your organization for the last 5 years:

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11. Has your organization had its own liability policies before? If yes, please describe: _____

12. Is your school at an owned or leased premise? ☐ Owned ☐ Leased
13. Is your school:
- ☐ MX
 - ☐ Flat track
 - ☐ Off-road
 - ☐ On-road
 - ☐ Road Course
 - ☐ Recreational
14. Does your school involve school-guided ride after the training session? ☐ Yes ☐ No
15. Do you and or your instructors purchase professional liability insurance? ☐ Yes ☐ No
16. Do you rent motorcycles for use at your school? ☐ Yes ☐ No