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MOTORCYCLE SCHOOL SUPPLEMENTAL APPLICATION

PRG 142062 (12-22)

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	
4.	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
11	Does your school involve school-guided ride after the training session? ☐ Yes ☐ No
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15.	Do you and or your instructors purchase professional liability insurance? $\ \square$ Yes $\ \square$ No
16.	Do you rent motorcycles for use at your school? ☐ Yes ☐ No