

# OREGON BICYCLE RACING ASSOCIATION

## 2007 Annual License Application

### Complete the following information

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ Date of Birth \_\_\_\_\_

Email \_\_\_\_\_ Club/Team \_\_\_\_\_

Occupation \_\_\_\_\_ Phone - Work (\_\_\_\_) \_\_\_\_\_

### Fees:

Adult membership  \$20

Juniors 18\* & under  \$5

\*age as of 12/31/2007

Optional donation (any amt)  \$

OBRA is a 501(c)(3) non-profit

### Choose disciplines you will race

Road

Track

Mountain Bike

Cyclocross

Questions? Call 503-667-6220 or online @ [www.obra.org](http://www.obra.org)

### Check all that apply

ROAD CATEGORIES/ CLASS			MOUNTAIN BIKE CATEGORIES/ CLASS	
Road	Track	Cyclocross	Cross Country	Downhill
<input type="checkbox"/> I	<input type="checkbox"/> I	<input type="checkbox"/> A	<input type="checkbox"/> Pro	<input type="checkbox"/> Pro
<input type="checkbox"/> II	<input type="checkbox"/> II	<input type="checkbox"/> B	<input type="checkbox"/> Semi Pro	<input type="checkbox"/> Semi Pro
<input type="checkbox"/> III	<input type="checkbox"/> III	<input type="checkbox"/> C	<input type="checkbox"/> Expert	<input type="checkbox"/> Expert
<input type="checkbox"/> IV	<input type="checkbox"/> IV	<input type="checkbox"/> Beginner	<input type="checkbox"/> Sport	<input type="checkbox"/> Sport
<input type="checkbox"/> V	<input type="checkbox"/> V		<input type="checkbox"/> Beginner	<input type="checkbox"/> Beginner
			<input type="checkbox"/> Single Speed	

Please only check categories for disciplines you intend to race. You will receive a race number or plate for those disciplines.

Class:  Junior 0-18  Master 40+  Senior 19-39  Men  
 Women

If this is a new membership, you will assigned Category 5 or Beginner. If you have previous racing experience, you will need to provide documentation to race another category.

Upgrades considered upon request. Submit a race resume.

Your racing age is your age on December 31, 2007

Interests:

Road  Track  Cyclocross  Time Trial  Tandem  
 Mtn Bike  Triathlon  Race Promotion  Official  Volunteer

**JOIN THE OREGON BICYCLE RACING ASSOCIATION AND HELP SUPPORT THE SPORT OF BICYCLE RACING IN OREGON. OBRA HELPS YOU BY PROVIDING SUPPORT TO BICYCLE RACE PROMOTERS AS WELL AS RACERS.**

Send the completed form along with a check payable to OBRA to:

OBRA Membership  
 P.O. Box 16355  
 Portland, OR 97292

or sign up online:  
[www.signmeupsports.com](http://www.signmeupsports.com)



For Official Use Only: Fee paid: \$ \_\_\_\_\_  
 Membership# \_\_\_\_\_ Road # \_\_\_\_\_ SS# \_\_\_\_\_ XC # \_\_\_\_\_ DH # \_\_\_\_\_  
 XC  DH  DS  OT  Upgrade \_\_\_\_\_ Old # \_\_\_\_\_