OREGON BICYCLE RACING ASSOCIATION

2007 Annual License Application

Complete the following information		
Today's Date:	Fees:	
Name:	Cyclocross only license*	🗆 \$10
Address:	Juniors 18** & under **age as of 12/31/2007	Free
City State Zip	Non-Race Supporter	□ \$5
Phone () Fax ()Date of Birth		
EmailClub/Team		
Occupation Phone – Work ()	*Cyclocross license valid until 12/31/07	

Questions? Call 503-667-6220 or online @ www.obra.org

Check all that ap	ply				
CATEGORIES/CLASSES			INTERESTS		
Road	Track	Cyclocross			
		DA	□ Road	Triathlon	
		🗖 B	Track	Tandem	
		□C	Time Trial	Race Promotion	
		Beginner	Cyclocross	Official	
			Mtn Bike	Volunteer	
Class:					
🗖 Junior 0-18	☐ Master 40+	🗖 Men	Send the completed form along with a check payable to OBRA to:		
□ Senior 19-39 □ Women		OBRA Membership P.O. Box 16355 Portland, OR 97292			
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.		or sign up online: www.signmeupsports.com			
Your racing age is your age on December 31, 2007					

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.



For Official	Use Only:					Fee paid: \$	
Members	hip#	Roa	d #	SS#	_ XC #	DH #	
□ XC	DH	DS	D OT	Upgrade _		Old #	