



## Single Event License Application

### Complete the following information

Name		Today's Date		<b>Fee:</b> <input type="checkbox"/> \$5  <b>Interests:</b> <input type="checkbox"/> Road <input type="checkbox"/> Track <input type="checkbox"/> Cyclocross <input type="checkbox"/> Time Trial <input type="checkbox"/> Tandem <input type="checkbox"/> Mountain Bike <input type="checkbox"/> Triathlon <input type="checkbox"/> Volunteer <input type="checkbox"/> Race Promotion
Address				
City		State	Zip	
Occupation		Email		
Phone - Work	Home		Fax	
USCF License	Club	Date of Birth		

### Check all that apply

**Road Category**     I     II     III     IV     V     Junior     Senior     Master  
**Mountain Bike Category**     Pro     Semi Pro     Expert     Sport     Beginner     Men     Women

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OBRA HELPS YOU BY PROVIDING SUPPORT TO BICYCLE RACE PROMOTERS AS WELL AS RACERS.



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