

<b>RACER / TEAM NAME:</b>	
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Crew Captain name and contact #:	
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Alternate Crew contact name and #	
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**VEHICLE #1**

Make / Model / Color	
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License Plate #	
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Identifies racer(s) on all 4 sides?	
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Insurance Company Name	
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**VEHICLE #2 if applicable**

Make / Model / Color	
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License Plate #	
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Identifies racer(s) on all 4 sides?	
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Insurance Company Name	
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**Follow Vehicle Set-Up:**

Rear Flashing Amber Lights	
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"Caution" signs	
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Slow Moving Triangle (covered when not following)	
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**Bicycles:**

#1 Make / Color (if team, rider name)	
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#2 Make / Color (if team, rider name)	
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#3 Make / Color (if team, rider name)	
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#4 Make / Color (if team, rider name)	
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Reflective material facing all directions on all bikes?	
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Lights attached to the night time bike, front and rear?	
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**TIME PENALTIES OR DQ MAY BE ASSESSED FOR VIOLATION OF VEHICLE STANDARDS**