



**USARM RACE WORKER APPLICATION
FIM WORLD SUPERBIKE CHAMPIONSHIP
MAZDA RACEWAY LAGUNA SECA
JULY 7, 8, 9, 2017**



APPLICATION INSTRUCTIONS:

- * ALL SPACES IN THIS APPLICATION MUST BE FILLED IN.
- * WRITE "N/A" IN SPACES YOU DON'T HAVE INFORMATION FOR.
- * PLEASE PROVIDE A VALID E-MAIL ADDRESS. MOST CONTACT WILL BE BY E-MAIL
- * YOU MUST BE ABLE TO WORK SAT AND SUN. 3 DAY WORKERS ARE PREFERRED AND WILL GET PREFERENCE IN ASSIGNMENTS

NAME _____ (one name per application please)

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ CELL PHONE _____

E-MAIL _____

MEMBERSHIP INFORMATION

ARE YOU A CURRENT MEMBER: YES NO (CIRCLE ONE)
(NOTE: YOU **MUST** BE A CURRENT DUES PAID USARM MEMBER WITH A CURRENT MEMBERSHIP APPLICATION **ON FILE** TO WORK THIS EVENT)

WE NEED 92 FLAGGERS, 140 HANDLERS, 12 COMMUNICATORS AND NUMEROUS OTHER POSITIONS TO FILL. WE TRY TO ACCOMMODATE AS MANY PEOPLE AS WE CAN, AS FAR AS TURN REQUESTS GO, BUT YOU KNOW YOU CAN'T PLEASE EVERYONE.

****FILLING OUT THIS APPLICATION DOES NOT GUARANTEE YOU WILL WORK THIS EVENT. YOU WILL RECEIVE CONFIRMATION IF YOU HAVE BEEN SELECTED FOR THIS EVENT. IF YOU HAVE ANY QUESTIONS ABOUT THIS FORM OR THIS EVENT, PLEASE CONTACT ONE OF YOUR BOARD MEMBERS. CONTACT INFORMATION CAN BE FOUND AT WWW.USARM.ORG****

(USARM RESERVES THE RIGHT OF FINAL SELECTION FOR ALL INDIVIDUALS FOR ANY & ALL EVENTS)

NAME _____ (Insert your name)

YEARS OF EXPERIENCE _____

SPECIALITIES: FLAG _____ COMM/RADIO _____ HANDLER _____

OTHER(LIST) _____

CAN YOU PHYSICALLY PICK UP A MOTORCYCLE ? YES NO

DID YOU WORK LAST YEARS RACE? _____ IF SO WHERE? _____

LUNCH TYPE: REGULAR _____ VEGGIE _____

WHAT POSITION ARE YOU APPLYING FOR? _____

THERE ARE 92 FLAG POSITIONS, 2 AT EACH STATION. A PRIMARY AND A SECONDARY FLAGGER. THE PRIMARY FLAGGER SHOULD BE MORE EXPERIENCED THAN THE SECONDARY ONE. BOTH WILL BE ON RADIO TO RACE CONTROL. THE PRIMARY FLAGGER DOES MOST OF THE FLAGGING. THE SECONDARY FLAGGERS MAIN JOB IS TO RUN THE NUMBER BOARD AND MECHANICAL BLACK FLAG.

THERE ARE 140 RESPONSE POSITIONS, 4 AT EACH STATION. ONE PERSON ON A RADIO TO RACE CONTROL, ONE PERSON WITH A FIRE EXTINGUISHER AND TWO HANDLERS (PICK UP AND MOVE DOWNED BIKES TO A SAFE LOCATION). ONE PERSON WILL BE DESIGNATED THE TEAM CAPTAIN.

THERE ARE 12 COMMUNICATOR POSITIONS, ONE PER TURN ON LANDLINE TO THE TOWER.

MOTORCYCLE EXPERIENCE (Please fill out as completely as possible. If needed attach a separate sheet)

EVENT _____ DUTIES _____

EVENT _____ DUTIES _____

EVENT _____ DUTIES _____

EVENT _____ DUTIES _____

EVENT _____ DUTIES _____

EVENT _____ DUTIES _____

NAME _____ (Insert your name)

TURN ASSIGNMENT / POSITION REQUEST

TURN / POSITION

1ST _____

2ND _____

3RD _____

DAYS AVAILABLE: FRI(7th) _____ SAT(8th) _____ SUN(9th) _____
(Check all that apply)

WILL YOU BE ABLE TO WORK ALL DAY SUNDAY? YES____ NO____

IF THE ANSWER IS NO, PLEASE GIVE REASON WHY _____

THERE IS A WORKERS CAMPING AREA FOR WORKERS ONLY. ANY NON
WORKER STAYING IN THE WORKER CAMPING AREA WILL HAVE TO BE
APPROVED BY THE WSBK COMMITTEE. NO EXCEPTIONS.

WILL YOU BE STAYING IN WORKERS CAMPING? YES____ NO____
TYPE OF CAMPING - TENT____ TRUCK/CAR____ TRAILER____ RV____
I AM THE PRIMARY OWNER OF THE CAMPING ENCLOSURE* _____

*DO NOT MARK IF YOU ARE SHARING SOMEONE ELSE'S ENCLOSURE

WHO WOULD YOU LIKE TO WORK WITH:

WHO WOULD YOU NOT LIKE TO WORK WITH:

(YOUR REASONS ARE NONE OF OUR BUSINESS & WILL REMAIN CONFIDENTIAL)

ANY OTHER INFORMATION YOU WOULD LIKE TO SHARE WITH US?

NAME _____(Insert your name)

EMERGENCY MEDICAL INFORMATION

MEDICATION USED: _____

ALLERGIES: _____

BLOOD TYPE _____

EMERGENCY NOTIFICATION/CONTACT

NAME: _____ RELATIONSHIP: _____

ADDRESS: _____

PHONE #: _____ ALT #: _____

PLEASE READ THE STATEMENT BELOW. SIGNING AND DATING WILL COMPLETE THE APPLICATION.

If accepted to work the race. I agree to fulfill my commitment to work the position assigned to me for the entire weekend. Failure to show up at your assigned position or leaving your post during the event without permission will result in your credentials being pulled and you will be asked to leave the track.

SIGNATURE _____ DATE _____

MAIL THIS FORM (AND IF NOT A CURRENT PAID MEMBER) A MEMBERSHIP APPLICATION WITH DUES TO:

**TED KUWADA /USARM
1221 JUNIPER DRIVE # G
GILROY, CA. 95020**

*****ALL APPLICATIONS WILL BE PROCESSED AS THEY ARRIVE, SO DON'T WAIT UNTIL THE LAST MINUTE TO SEND THIS IN****

DEADLINE for Applications is MAY 8TH 2017

****FOR BOARD USE ONLY****

RECEIVED ____/____/____

ACCEPTED: YES / NO

CONFIRMED ____/____/____

HOW _____ BY _____