Washington Motorcycle Road Racing Association 2020 Novice Graduation Form

| Novice Name: | | | | |
|--|-------------------|---------------|---|-------------------------------|
| | | | | You must complete the require |
| You must complete 10 races sa | afely. DNS, DNF, | and DQ's do r | ot count towards graduation. | |
| Clas | sses and Dates o | of Completed | Races | |
| 1 | | 6 | | |
| 2 | | 7 | | |
| 3 | | 8 | | |
| 4 | | 9 | | |
| 5 | | 10 | | |
| Airfence Help Date: | | | | |
| Race Day Help Date: Corner Working Date: | | | | |
| Tech Inspection Date: | | | | |
| | • | | I out this form and talk with your your next step is to submit this | |
| I wish to be observed in | (class) on (c | date) | | |
| | t, sportsmanship, | and understa | graduate. This decision is based anding of race-day operations. If registration on your behalf. | |
| | | | Last Rode w/ Novice on: | |
| Signature of Race Director: | | | Date | |