



2010 Rider Advancement Appeal Form

(Appeal to the National Advancement System)

Please fill out the following two pages to the best of your ability. Be sure to provide any information that will help the appeal committee understand why you would like to appeal your classification. You may attach any additional necessary information to provide any more supporting information.

Name of Rider: _____

AMA #: _____

Address: _____

Phone #: _____

Email Address: _____

District: _____

District Contacts: _____

Years Racing: _____

Ever Participated at The Amateur National Loretta Lynn's? If Yes, what year?

****Method of Payment:**

Money Order:

¹Credit Card:

¹ Must provide phone number to be contacted at for processing payment



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Reasoning for Appeal:

Goals for this racing season: