



## WORKFORCE & CONTINUING EDUCATION

# TOTAL CONTROL INTERMEDIATE RIDING CLINIC

### ADMISSION REQUIREMENTS

1. Total Control Intermediate Riding Clinics (TCIRC) are open to any person who is 18 years old or older.
2. Students must present their valid Texas Class C, or higher, driver license to enroll into a TCIRC.
3. Each student must provide their own motorcycle/scooter and riding gear that meet the requirements below.
4. Students must be able to pass the entry exercise conducted at the beginning of class.

### STUDENT EQUIPMENT REQUIREMENTS

#### **Two-wheel motorcycle or scooter**

Good condition, street-legal motorcycle/scooter that is registered, licensed, and insured. Student must bring license, registration and insurance to class. Motorcycle must pass an inspection by the instructor.

#### **Helmet**

DOT approved helmet

#### **Eye Protection**

Ordinary prescription glasses or sunglasses may be worn. A helmet visor is acceptable.

#### **Clothing**

**Full length, sturdy pants** (jeans or motorcycle specific pants; no leggings or sweat pants);  
**Long sleeve shirt** is required. (Long sleeve jacket is recommended.)

#### **Gloves**

Full finger, street motorcycle specific or all leather gloves. (No mechanics or dirt bike gloves)

#### **Footwear**

Sturdy, over-the-ankle footwear is required. The ankle bone must be covered with sturdy footwear. Canvas high tops or Chuck Taylor Converse shoes are NOT acceptable.

#### TIME

8am – 5pm

#### LOCATION

Emerging Technology Complex, Industrial Training Center, Room 221

**PLEASE NOTE: Students are encouraged to bring water or Gatorade, particularly during the warm months.**



**WORKFORCE AND CONTINUING EDUCATION**

**TOTAL CONTROL INTERMEDIATE RIDING CLINIC (TCIRC)  
REGISTRATION FORM**

Please indicate below the date of the class for which you are registering:

\_\_\_\_\_  
(Date)

Email Address \_\_\_\_\_

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_ SSN \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ County of Residence \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_ Employer \_\_\_\_\_ Job Title \_\_\_\_\_

All registration forms are required prior to start date or students cannot attend class. Registration is not guaranteed until tuition is paid.

**Refund Policy**

The Refund Policy for this class coincides with the standards for all of Victoria College Workforce & Continuing Education courses. No refunds will be issued for students failing to show up for class or arriving late.

Students must pass a qualifying exercise at the beginning of the class in order to participate in this course. Those that do not pass the qualifying exercise will be scheduled for the next open date in the BasicRider Course and will receive a \$15 refund. To complete the TCIRC, riders must pass knowledge and skills tests. While many students pass on their first attempt, it is not uncommon for some students to repeat the course. Tuition will be charged for repeating the course.

Classes will be held rain or shine. The instructor may cancel class if he deems it necessary in the event of dangerous weather conditions.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

Please sign here indicating that you have read and understand the above statements and understand the admission and equipment requirements.



**TEXAS DEPARTMENT OF PUBLIC SAFETY  
Motorcycle Operator Training Program  
Student Information**



Both sections of this form must be completed and signed prior to your first class. Your RiderCoach will collect it during the first session. If you are under 18 years of age you must bring this form and a Medical Consent for Minor form signed by your parent or guardian to the first day of class. If you fail to do so, you will not be allowed to participate in the course.

Name: \_\_\_\_\_  
(First) (MI) (Last)

Address: \_\_\_\_\_  
(Street) (City) (Zip)

Daytime Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver License Number: \_\_\_\_\_ State of: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
(Name) (Relationship) (Phone)

Today's presentation is being made with materials supplied by the Motorcycle Safety Foundation and the Texas Department of Public Safety as a public service. This does not imply any endorsement by MSF or the DPS of the sponsors or any other sponsors, supporting organizations, equipment, motorcycles or other materials involved in the presentation of a RiderCourse. Our aim is to expose you to ways to ride more safely. While we cannot and will not assume responsibility for the safe operation of your motorcycle, it is our hope that by presenting responsible viewpoints on safety we will expose riders and the general public to proper and prudent motorcycle operation. As a participant, you are responsible for your own learning - we cannot learn for you. **We're here to assist your learning, we cannot guarantee it or put it to use.**

I recognize and understand the risk involved in learning to ride, and riding a motorcycle, I acknowledge that risk by signing the Motorcycle Safety Course Waiver & Indemnification Form. I understand that my performance will be evaluated and that I must satisfactorily complete each training phase before advancing to the next level. Should a RiderCoach determine that I am a danger to my classmates, or myself, I will not be allowed to continue the course. I understand that this decision is for my safety and the safety of others and I will abide by the decision of the RiderCoach. I acknowledge that if my lack of progress impedes or interferes with the class that I may not be allowed to continue the class. To receive the Motorcycle Operator Training Course Completion Card, I must demonstrate competent motorcycle operation; if applicable, by attaining acceptable scores on the skill evaluation and the knowledge test. Failure of the knowledge test or the on-cycle evaluation or not satisfactorily completing a phase of the course is considered a failure for the entire course. **Refunds for persons failing or being dismissed from the course are at the discretion of the sponsor.**

**Check All That Apply**

- I am **NOT** under the care of a physician, or taking medication, either of which may affect my ability to ride during this course.
- I am under the care of a physician, but I have made the decision that I am able to ride. I accept full responsibility for this decision.
- I am taking medication, but I have made the decision that I am able to ride. I accept full responsibility for this decision.

**NOTE TO THE STUDENT:** If you have physical limitations or are on medication, please be aware that the course is strenuous and physically demanding. If you have a heart condition, are prone to dizziness, or have a physical or mental condition which may adversely affect your performance, we advise against participating in the class. You are responsible for your own decision to participate. If your condition adversely affects your performance, our RiderCoaches will ask you to leave the class.

All students are required to be on time for each class session. All students are expected to participate fully in each and every exercise and to follow the directions of the RiderCoach. Tardiness, absence from any part of the course, or failure to follow the direction of the RiderCoach may result in dismissal from the course.

**By signing this document, I hereby agree to follow all the rules and regulations of the program and that all information provided by me is true and correct.**

Print Your Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of parent or legal guardian: \_\_\_\_\_  
(Only if student is under 18 years old)

I request to use my personal motorcycle for the Motorcycle Operator Training Course and I accept responsibility for any damages incurred as a result.

**READ CAREFULLY**

**WAIVER AND RELEASE OF LIABILITY**

In consideration of **Victoria College**; furnishing services and/or equipment to enable me to participate in the Motorcycle Rider Education Class, I agree as follows:

I fully understand and acknowledge that : (a) risks and dangers exist in my use of motorcycles and motorcycle equipment and my participation in the Motorcycle Rider Education Class activities; (b) my participation in such activities and/or use of such equipment may result in injury or illness including, but not limited to bodily injury, disease, strains, fractures, partial and/or total paralysis, death or other ailments that could cause serious disability; (c) these risks and dangers may be caused by the negligence of the owners, employees, officers or agents of **Victoria College** the negligence of the participants, the negligence of others, accidents, breaches of contract, the forces of nature or other causes. These risks and dangers may arise from foreseeable or unforeseeable causes; and (d) by my participation in these activities and/or use of equipment, I hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or in part by the negligence or other conduct of the owners, agents, officers, or employees of **Victoria College** or by any other person. If I have brought a motorcycle to use in the Safety Course, I also agree that this release applies to any damage that occurs to it during the Safety Course.

*Initial* \_\_\_\_\_

I, on behalf of myself, my personal representatives and my heirs hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify **Victoria College** ; and its owners, agents, officers and employees from any and all claims, suits or causes of action for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my use of motorcycles and motorcycle equipment or my participation in the Motorcycle Rider Education Class activities. I specifically understand that I am releasing, discharging and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by **Victoria College**; and its owners, agents, officers or employees.

*Initial* \_\_\_\_\_

**I HAVE READ THE ABOVE WAIVER AND RELEASE AND BY SIGNING IT AGREE IT IS MY INTENTION TO EXEMPT AND RELIEVE ; Victoria College; FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.**

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
DATE OF BIRTH

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF PARENT OR GUARDIAN  
(If less than 18 years old)

\_\_\_\_\_  
DATE

(REV: 08/03)



Completion Card # \_\_\_\_\_

TOTAL CONTROL TRAINING, INC
COURSE WAIVER AND INDEMNIFICATION

Participation in this course requires physical stamina, motor coordination, and mental alertness. The undersigned hereby attests that he/she has no known physical or mental limitations and has not used any form of alcohol, prescription or non-prescription drugs that could impair his/her performance in this course. Participants under 18 years of age must have this form signed by a parent or guardian.

READ CAREFULLY: THIS SECTION IS A LEGAL RELEASE, ASSUMPTION OF RISK, WAIVER AND COVENANT NOT TO SUE AGREEMENT

In consideration of VICTORIA COLLEGE, Total Control Training, Inc, its sponsors, its supporters, its affiliates, its lessors, its training locations, the training sponsor, the owner of the training motorcycle, and the owner of the land upon which training occurs, including each of their members, employees, officers, instructors and/or agents (the "Motorcycle Course Providers"), furnishing services, equipment, and/or curriculum to enable me to participate in the Motorcycle Rider Education Course I agree as follows:

I fully understand and acknowledge that: (a) there are DANGERS AND RISK OF INJURY, DAMAGE, OR DEATH that exist in my use of motorcycles and motorcycle equipment and my participation in the Motorcycle Safety Course activities; (b) my participation in such activities and/or use of such equipment may result in injury or illness including, but not limited to, BODILY INJURY, DISEASE, STRAINS, FRACTURES, PARTIAL OR TOTAL PARALYSIS, OTHER AILMENTS THAT COULD CAUSE SERIOUS DISABILITY, OR DEATH; (c) these risks and dangers may be caused by negligence of the Motorcycle Course Providers; the negligence of others, including other Motorcycle Rider Education Course participants; and may arise from foreseeable or unforeseeable causes; and (d) by participating in these activities and/or use of the equipment, I, on behalf of myself, my personal representatives and my heirs, hereby assume all risks and all responsibility, and agree to release the Motorcycle Course Providers for any injuries, losses and/or damages, including those caused solely or in part by the negligence of the Motorcycle Course Providers, or any other person. If I have brought a motorcycle to use in the Motorcycle Rider Education Course, I also agree that this release applies to any damage that occurs to it during the Motorcycle Rider Education Class.

I fully understand and acknowledge that: (a) there are DANGERS AND RISK OF INJURY, DAMAGE, OR DEATH that exist in my use of motorcycles and motorcycle equipment and my participation in the Motorcycle Rider Education Course activities;

I agree and understand that, on behalf of myself, my personal representatives and my heirs, I am relinquishing any and all rights I now have or may have in the future to sue the Motorcycle Course Providers for any and all injury, damage, or death I may suffer arising from motorcycle riding or its equipment, including claims based on the Motorcycle Course Providers' negligence.

If I have brought a motorcycle/scooter to use in the Motorcycle Rider Education Course, I also agree that this release applies to any damage that occurs to it during the Motorcycle Rider Education Course.

I HAVE READ THIS WAIVER AND RELEASE AGREEMENT AND BY SIGNING BELOW I AGREE IT IS MY INTENTION TO ASSUME ALL RISKS AND RELEASE THE ABOVE-NAMED MOTORCYCLE COURSE PROVIDERS FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE. I have had the opportunity to ask any questions about the above waiver and release and I understand its terms and meaning.

Participant Name - Please Print Participant Signature

Date Signature of parent or legal guardian if less than 18 years old Relationship

READ CAREFULLY: THIS SECTION IS AN INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

In consideration of VICTORIA COLLEGE Total Control Training, Inc., its sponsors, its supporters, its affiliates, its lessors, its training locations, the training sponsor, the owner of the training motorcycle, and the owner of the land upon which training occurs, including their members, employees, officers, instructors and/or agents (the "Motorcycle Course Providers"), furnishing services, equipment, and/or curriculum to enable me to participate in the Motorcycle Rider Education Course, I agree as follows:

I, on behalf of myself, my personal representatives and my heirs, agree to hold harmless, defend, and indemnify the Motorcycle Course Providers from any and all claims, suits, or causes of action by others for bodily injury, property damage, or other damages which may arise out of my use of motorcycles and motorcycle equipment or my participation in the Motorcycle Rider Education Course activities, including claims arising from the Motorcycle Course Providers' or any other party's negligence.

I HAVE READ THIS INDEMNIFICATION AND HOLD HARMLESS AGREEMENT AND BY SIGNING I AGREE IT IS MY INTENTION TO ACCEPT LEGAL RESPONSIBILITY AND PAY FOR ANY LOSS FOR CLAIMS OR LAWSUITS AGAINST ABOVE-NAMED MOTORCYCLE COURSE PROVIDERS ARISING FROM MY PARTICIPATION IN THE MOTORCYCLE RIDER EDUCATION COURSE. I have had the opportunity to ask any questions about the indemnification and hold harmless section and I understand its terms and meaning.

Participant Name - Please Print Participant Signature

Date Signature of parent or legal guardian if less than 18 years old Relationship Rev 3/15