

WORKFORCE & CONTINUING EDUCATION

MOTORCYCLE BASIC RIDERCOURSE

ADMISSION REQUIREMENTS

- 1. Basic motorcycle operator training courses are open to any person who is:
 - a) physically and mentally capable of being licensed in Texas as a motorcycle operator; and
 - b) at least 15 years old on the day the course begins.
- 2. A person who is 15 years old but is less than 18 years old may not enroll into a basic motorcycle operator training course unless he or she can present the proper driver education form verifying successful completion of the classroom portion phase of driver education, has a Class C learner license or an unrestricted Class C, or higher, driver license.
- 3. A person who is 18 years old or older may not enroll into a basic motorcycle operator training course unless he or she has a picture identification to confirm his or her identity.
- 4. A person who is unable to balance and ride a bicycle may not enroll into a basic motorcycle operator training class.
- 5. All students must complete the MSF *eCourse* online module, print a copy of the certificate of completion, and submit the certificate to the instructor on the first day of class. The certificate may also be emailed to Mary.Hardy@victoriacollege.edu prior to the beginning of the course. A Coupon Code for the *eCourse* will be emailed to students following registration.

STUDENT EQUIPMENT REQUIREMENTS

Helmet

Helmets are not provided. Students must use their own helmet that meets the Department of Transportation (DOT) standards.

Eve Protection

Students must furnish their own eye protection. Face shield on personal helmet is ideal. Corrective lenses and sunglasses acceptable.

Clothing

Long sleeve shirt and/or jacket and long pants are required! All skin between neck and ankles must be covered!

Gloves

Students are **required** to furnish their own full-fingered gloves. Leather gloves with insulation appropriate for weather conditions is recommended. However, any full fingered gloves of reasonable protective material is acceptable (Instructor's judgment is final).

Footwear

Sturdy shoes/boots that cover the ankle and provide slip resistant footing is required and must be furnished by the students! High top athletic shoes with padded sides of leather or simulated leather are acceptable. Canvas or cloth top shoes **are not** acceptable.

TIME

Saturday 7:30am-5pm Sunday 8am-5pm

<u>LOCATION – 7403 Lone Tree Road, Victoria, TX 77905</u>

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

MOTORCYCLE BASIC RIDERCOURSE REGISTRATION FORM

(Date)				
Email Address				
Last Name	First		Middle Initial	_ SSN
Date of Birth	Sex	Count	y of Residence	
Mailing Address		City	State	Zip Code
Home Phone #	Work Pho	ne #	Employer	Job Title
Refund Policy	ranteed until tuition		all of Victoria College Workford	ce & Continuing Education
Refund Policy The Refund Policy for thi courses. No refunds will To complete the course, not uncommon for some	is class coincides with the be issued for students for riders must pass a known a students to repeat the	e standards for ailing to show u vledge and skill t course. Tuition	p for class or arriving late. est. While many students pass will be charged for repeating t	s on their first attempt, it is he course.
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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. Participants under 18 years of age must have this form signed by a parent or guardian in person at the training location or must be notarized. If you fail to do so, you will not be allowed to participate in the course.

Namai	• •			
Name:(First)	(MI)		(Last)	
Address:				
(Street)		(City)	(Zip)	(County)
Daytime Phone: _()		Email:		
Date of Birth:	Driver License Number:		State of:	
Emergency Contact:		0.1	1	
(Name)	(Relation	nship)	(Phone)
public service. This does not equipment, motorcycles or of While we cannot and will not viewpoints on safety we will for your own learning - we can I recognize and understand the	made with materials supplied by the M imply any endorsement by MSF or the ther materials involved in the presentation assume responsibility for the safe open expose riders and the general public to annot learn for you. We're here to assume risk involved in learning to ride, and	DPS of the sponsors or a con of a RiderCourse. Our ration of your motorcycle proper and prudent motorist your learning, we carriding a motorcycle, I ac	any other sponsors, suppor aim is to expose you to e, it is our hope that by porcycle operation. As a ponnot guarantee it or putch that have been supported by several that have been supported by the several that have been supported by	orting organizations, or ways to ride more safely. Oresenting responsible participant, you are responsible at it to use.
phase before advancing to the continue the course. I unders acknowledge that if my lack Motorcycle Operator Trainin scores on the skill evaluation	ation Form. I understand that my perfer next level. Should a RiderCoach detertand that this decision is for my safety of progress impedes or interferes with the groupse Completion Card, I must demand the knowledge test. Failure of the erred a failure for the entire course. Refer	ermine that I am a danger and the safety of others a the class that I may not b constrate competent moto knowledge test or the on	to my classmates, or my and I will abide by the de- e allowed to continue the orcycle operation; if appl -cycle evaluation or not	yself, I will not be allowed to ecision of the RiderCoach. I e class. To receive the icable, by attaining acceptable satisfactorily completing a
Check All That Apply				
☐ I am <u>NOT</u> under the	e care of a physician, or taking medicat	tion, either of which may	affect my ability to ride	during this course.
\Box I am under the care	of a physician, but I have made the dec	cision that I am able to ri	de. I accept full respons	ibility for this decision.
☐ I am taking medicat	tion, but I have made the decision that l	I am able to ride. I accep	ot full responsibility for the	his decision.
demanding. If you have a he performance, we advise again	: If you have physical limitations or a art condition, are prone to dizziness, or ast participating in the class. You are or r RiderCoaches will ask you to leave th	have a physical or ment esponsible for your own	al condition which may a	adversely affect your
	e on time for each class session. All stuach. Tardiness, absence from any part of			
By signing this document, I true and correct.	hereby agree to follow all the rules a	and regulations of the p	rogram and that all inf	ormation provided by me is
Print Your Name:		Signature:		Date:
Signature of parent or legal g	uardian:(Only if student is under 18 ye	ears 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.

SAFETY COURSE GENERAL RELEASE, WAIVER & INDEMNIFICATION AGREEMENT rev. 03/20
In consideration for, the Motorcycle Safety Foundation, Inc. ("MSF"), the training sponsor, the owner of the training motorcycle and premises upon which training occurs, including each of their affiliates, subsidiaries, members, employees, officers, coaches, instructors, aides, and/or agents (the "Released Parties"), furnishing services, equipment, and/or curriculum and permitting the undersigned to participate in this Motorcycle Safety Course (the "Course"), the undersigned Participant agrees to all of the following:
Participation in the Course requires physical stamina, motor coordination, and mental alertness. I hereby attest that I have no known physical or mental limitations and have not used any form of alcohol, or prescription or non-prescription drugs that could impair my performance in the Course. Participants under 18 years of age must have this form signed by a parent or guardian IN PERSON at the training location, or this form must be NOTARIZED.
I fully understand and acknowledge that (a) this Agreement is intended to be as broad and inclusive as permitted by the laws of the State in which the Course is conducted; (b) if any portion of this Agreement is for any reason held invalid or legally unenforceable, then the balance shall, notwithstanding, continue in full force and legal effect; and (c) I have had the opportunity to ask any questions about this Agreement and I fully understand its terms and meaning.
READ CAREFULLY: THIS IS A GENERAL RELEASE, WAIVER, ASSUMPTION OF RISK & COVENANT NOT TO SUE
I fully understand and agree that: (a) there are DANGERS AND RISKS OF INJURY, DAMAGE, OR DEATH that exist in my participation in the Course and use of motorcycles and motorcycling equipment ("Motorcycling Activities"); (b) my participation in the Course and Motorcycling Activities 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, AND DEATH; (c) these risks and dangers may be caused by negligence of Released Parties, other Course participants, or others, and may arise from foreseeable or unforeseeable causes; and (d) by participating in the Course and Motorcycling Activities, I, on behalf of myself, my personal representatives and my heirs, hereby knowingly and voluntarily assume all risks and all responsibility, and agree to release the Released Parties for any injuries, losses and/or damages, including those caused solely or in part by negligence of the Released Parties or any other person. If I have brought a motorcycle or helmet to use in the Course, this Agreement applies to any damage that occurs to or from my motorcycle or helmet during the Course.
I fully understand and agree that, on behalf of myself, my personal representatives and my heirs, I hereby covenant not to sue, and am relinquishing any and all rights I now have or may have in the future to sue the Released Parties for any and all injury, damage, or death, whether known or unknown, that I may suffer arising from the Course, or from motorcycle riding or its equipment, including claims based on the Released Parties' negligence.
I HAVE READ THIS AGREEMENT AND BY SIGNING BELOW I AGREE TO THE ABOVE TERMS, AND TO ASSUME ALI RISKS AND RELEASE THE ABOVE-NAMED RELEASED PARTIES FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.
License or ID# and State Participant Signature
Date – MM/DD/YYYY Parent/Legal Guardian signature, if Participant under 18 yrs of age Relationship License or ID# and State
READ CAREFULLY: THIS IS AN INDEMNIFICATION AND HOLD HARMLESS AGREEMENT
I, on behalf of myself, my personal representatives and my heirs, agree to hold harmless, defend, and indemnify the Released Parties from any and all claims, suits, or causes of action by any third parties, including Released Parties or other Course participants, for bodily injury, property damage, or other damages that may arise out of my use of motorcycles and motorcycle equipment or my participation in the Course, including claims arising from the negligence of Released Parties, other Course participants, or any other party.
I HAVE READ THIS AGREEMENT AND BY SIGNING BELOW I AGREE TO THE ABOVE TERMS, AND TO ACCEPT LEGAL RESPONSIBILITY AND PAY FOR ANY LOSS FOR CLAIMS OR LAWSUITS AGAINST THE ABOVE-NAMED RELEASED PARTIES ARISING FROM MY PARTICIPATION IN THE COURSE.
Participant Name (Printed) – First, Middle, Last License or ID# and State Participant Signature

License or ID# and State

Date – MM/DD/YYYY Parent/Legal Guardian signature, if Participant under 18 yrs of age Relationship

Waiver and General Release of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is reported to be extremely contagious. The state of medical knowledge is evolving, but the virus is believed to spread from person-to-person contact and/or by contact with contaminated surfaces and objects, and even possibly in the air. People reportedly can be infected and show no symptoms and therefore spread the disease. The exact methods of spread and contraction are unknown, and there is no known treatment, cure, or vaccine for COVID-19. Evidence has shown that COVID-19 can cause serious and potentially life-threatening illness and even death.

The Motorcycle Safety Foundation, Inc. ("MSF"), the training sponsor, the owner of the training motorcycle and premises upon which training occurs, including each of their affiliates, subsidiaries, members, employees, officers, coaches, instructors, aides, and/or agents (the "Released Parties") cannot prevent you from becoming exposed to, contracting, or spreading COVID-19 while participating in this Motorcycle Safety Course or utilizing the Released Parties' services or premises (collectively, the "Course"). It is not possible to prevent against the presence of the disease. Therefore, if you choose to participate in the Course, you may be exposing yourself to and/or increasing your risk of contracting or spreading COVID-19.

ASSUMPTION OF RISK: I have read and understood the above warning concerning COVID-19. I hereby choose to accept the risk of contracting COVID-19 for myself, and for my family members or others who I may expose, in order to participate in the Course. These services are of such value to me that I accept the risk of being exposed to, contracting, and/or spreading COVID-19 in order to participate in the Course.

<u>WAIVER OF LAWSUIT/LIABILITY</u>: I hereby forever release and waive my right to bring suit against the Released Parties in connection with exposure, infection, and/or spread of COVID-19 related to my participation in the Course. I understand that this waiver means I give up my right to bring any claims including for personal injuries, death, disease or property losses, or any other loss, including but not limited to claims of negligence, and give up any claim I may have to seek damages, whether known or unknown, foreseen or unforeseen.

OTHER TERMS: I fully understand and agree that (a) this Release is intended to be as broad and inclusive as permitted by the laws of the State in which the Course is conducted; (b) if any portion of this Agreement is for any reason held invalid or legally unenforceable, then the balance shall, notwithstanding, continue in full force and legal effect; and (c) I have had the opportunity to ask any questions about this Agreement and I fully understand its terms and meaning.

I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS WAIVER AND GENERAL RELEASE, AND FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE:

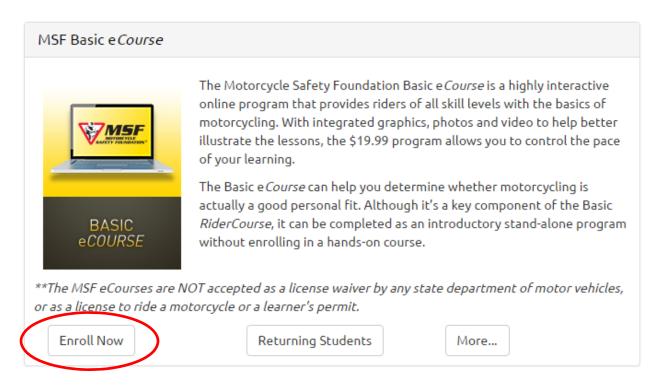
Signature:	Date:	
Name (printed):		
I am the parent or legal guardian of the m hereby do consent to the terms and condit	nor named above. I have the legal right to consent to and, by signing boons of this Waiver and General Release.	elow, I
Signature:	Date:	
Name (printed):		

MSF Basic eCourse Minimum System Requirements

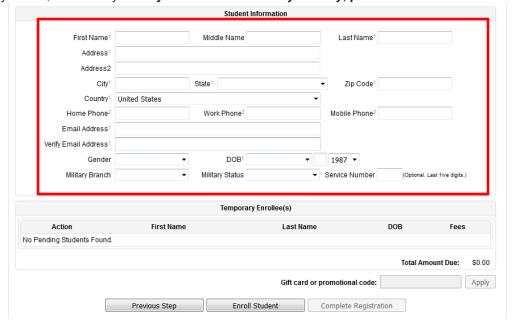
- Internet connection: Broadband connections work best. The MSF *eCourse* is video intensive.
- Browser support: Current versions of Chrome, Safari and Firefox are all supported. For Internet Explorer, version 10 or above is supported.
- Be sure JavaScript is enabled on your browser.
- The *eCourse* runs best on a desktop computer with at least 1024x768 resolution.
- The *eCourse* requires Adobe Flash so it will not work on an iPad.
- The *eCourse* is not optimized for mobile phones or tablets.
- You will need access to a printer at the end of the course to print a completion certificate. The certificate may also be emailed to Mary.Pullin@victoriacollege.edu.

MSF Basic eCourse Enrollment Process

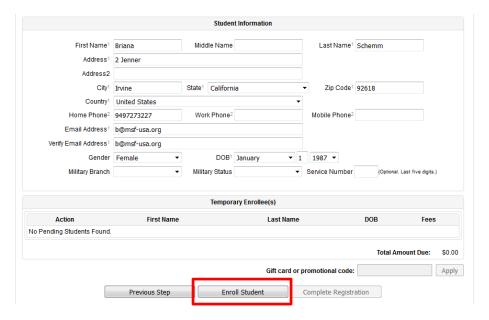
To get to the registration page of the MSF Basic e*Course*, visit http://msf-usa.org/, click on "Digital" at the top of the page, then scroll down to the Basic eCourse and click on "Enroll Now":



Fill out the Student Information as required. **Note: The military fields are not required. If you are active duty military, filling out these fields are optional. However, if you choose to fill them out, then you must fill out all three: Military Branch, Military Status, and Military ID. If you are not active duty military, please do not fill out these fields.

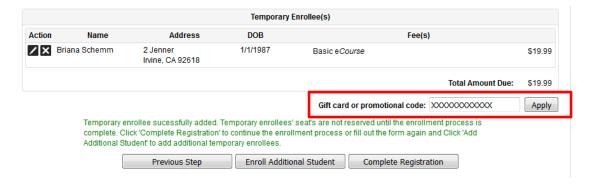


Once you have filled in the "Student Information", click on "Enroll Student" at the bottom of the page in the middle

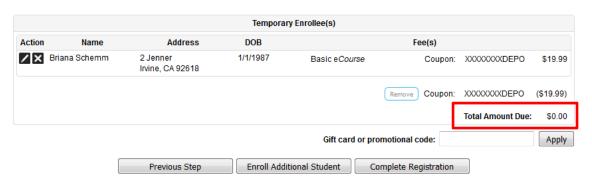


Once you have clicked on "Enroll Student", you will notice your information appear just above the button in a small area called "Temporary Enrollee". Once this occurs, then the Coupon Code field will activate and allow you to type in your code. Make sure to enter the Coupon Code exactly as provided with no extra spaces in front of or after the code. Caps sensitive, no spaces or dashes. Then click "Apply".

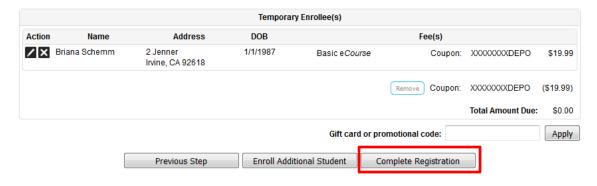
**We use capital alphabetical letters in the codes. We <u>do not</u> use the number "zero". So if you notice an "O" in your code, it is the capital letter "O".



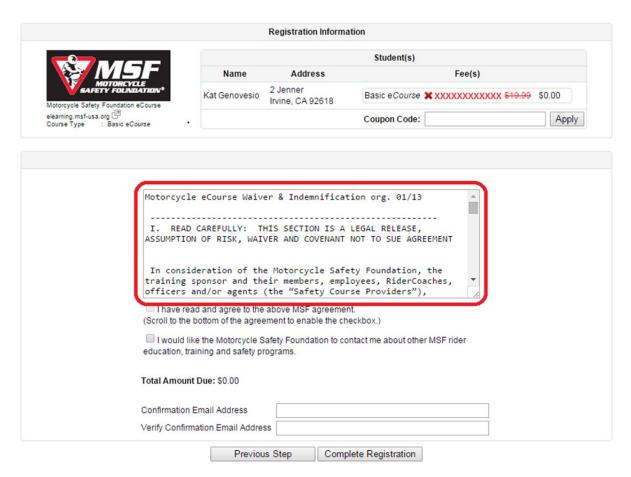
After clicking on "Apply", the \$19.99 fee will re-total to \$0.00:



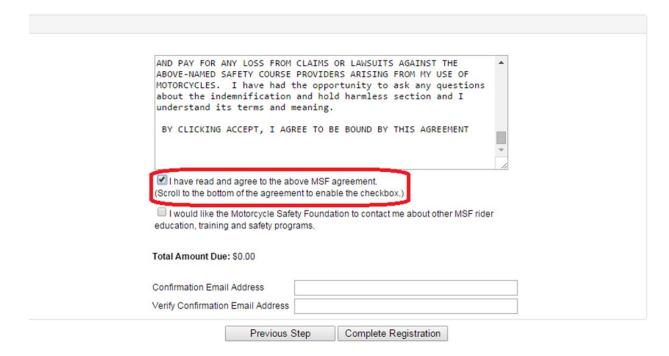
Click on "Complete Registration" to move forward to the next page:



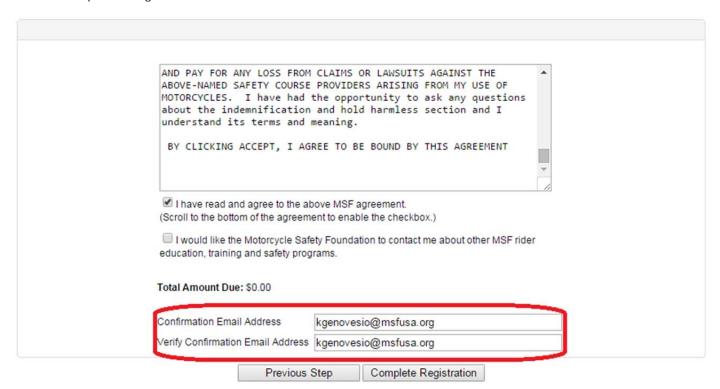
From here, you need to read the Motorcycle eCourse Waiver & Indemnification. Using the scroll-bar on the right side of the agreement, you must read through the agreement to the end to activate the first check-box underneath the agreement:

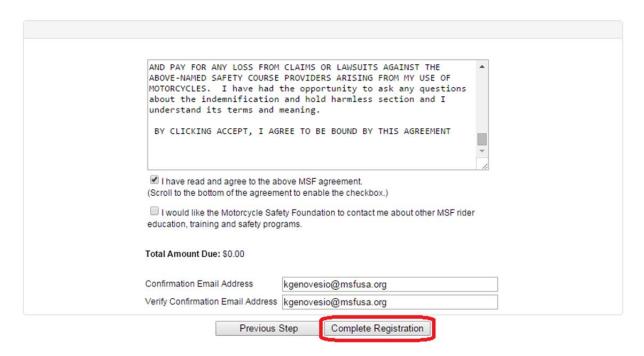


Click check on the box under the Agreement to verify that you have read and agree with the Agreement

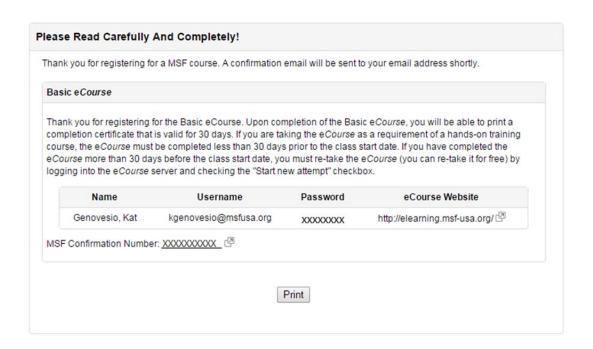


Type your email address in both the "Confirmation Email Address" and Verify Confirmation Email Address" field, then click on "Completion Registration":





The following screen will provide you with your e *Course* account information. This will show your Username (which is the email address you used to register for the course with), your password, and your MSF Confirmation Number for your records.

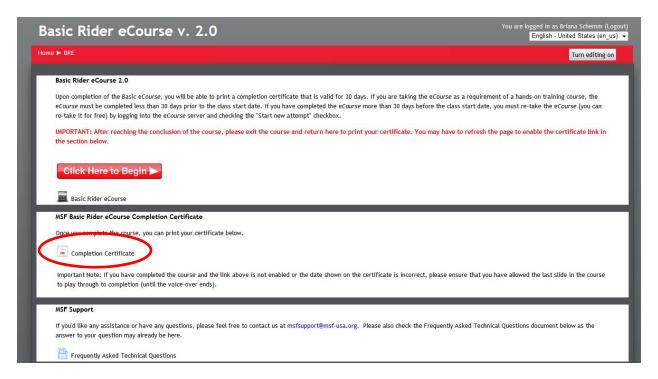


You will also receive an email with this information.

If you need further assistance, please contact the **MSF Support Desk** at msf-usa.org, or (949) 727-3227 x3158, Monday - Wednesday, 8:00am-4:30pm and Thursday - Friday, 8:30am - 5:00pm PDT.

Saving Your eCourse Certificate As A PDF File

Once you have completed and passed the MSF Basic e*Course*, you can print your e*Course* Certificate of Completion as a PDF file so that you can either email it to yourself or to your training provider. When you log into your e*Course* you will find a link to your certificate on the menu page:



This will open up your certificate so that you can print.

When you click on your certificate, it will open and you'll see a prompt to print it:

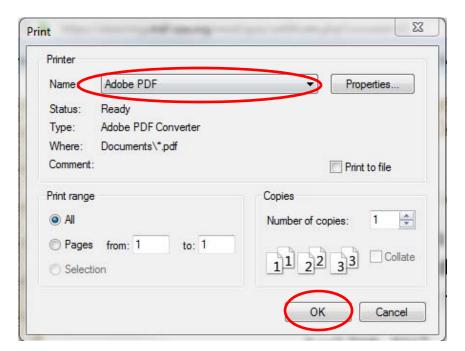


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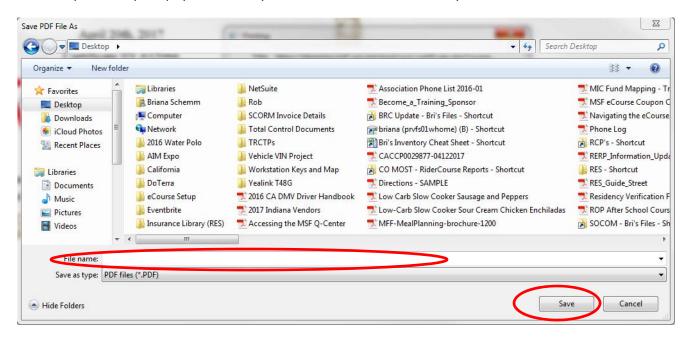
You can print to your printer, or choose to save as a PDF file to email to yourself or your training provider.



Selected "Adobe PDF" and click on OK:



Your computer will prompt you to name your certificate and tell it where you want it saved:





If you need further assistance, please contact the MSF Support Desk at msf-usa.org, or (949) 727-3227 x3158, Monday through Friday, 8:00am-4:30pm Pacific Time.