2019 Connecticut Rider Education Program

Access the Motorcycle Safety Foundation online course at
https://training.msf-usa.org/ecourse/basic.

**BASIC RIDER COURSE (BRC):** provides you with the online e-course, plus classroom and on-cycle instruction. It is designed to prepare you with the awareness and knowledge necessary for safe scooter or motorcycle operation. Motorcycles are provided. You must have either a valid driver’s license or a motorcycle permit (not both) and successful completion of the online MSF e-course prior to start of class.

Fee: $220 non-refundable

**PRIVATE/SEMI-PRIVATE LESSONS:** provide you with BRC training, classroom and on-cycle activities in a more personalized environment. Your abilities will determine how long the course will take. Please call for information. *(Not offered at the Fairfield location.)* The MSF e-course must be successfully completed prior to starting class.

Fee: $850 non-refundable for Private lessons
$425 non-refundable for Semi-private lessons

**EXPERIENCED RIDER COURSE (ERC):** is a one-day, on-cycle only course designed to improve rider skills in braking, evasive maneuvers, and turning, and will provide you with "street strategies" necessary for survival. **You must have:** a street-legal motorcycle or scooter, and a valid motorcycle license, registration & insurance card. Class size is limited to twelve riders – passengers welcomed at no extra charge. *(Offered in Fairfield only at this time.)*

Fee: $100 non-refundable

**RETURNING RIDER COURSE (RRBRC):** has the e-course, plus one-day of on-cycle and classroom instruction for those who already know how to ride a motorcycle and are able to operate a clutch, shift, and stop a motorcycle. This course begins with a riding skills evaluation. **The MSF e-course must be successfully completed prior to starting class.** *(Offered in Fairfield only at this time.)*

Fee: $175 non-refundable

**REGISTRATION AND PAYMENT:**
Registration is on a first come, first served basis. Please choose three classes that fit your schedule. You will be automatically enrolled in the first available course.

Complete the registration form and the Connecticut Rider Education Program Waiver and Release of Liability form (those under eighteen years of age: a parent or guardian must also sign; please request the Minors’ Waiver).

- **By mail:** TCC Motorcycle Program, 271 Scott Swamp Road, Farmington, CT 06032
- **In person:** Office hours are Monday through Friday, 9:00am to 4:00pm, in the Continuing Education Office, 700 Building, room 7-116 (address above).
- **By fax:** Send to (860) 606-9732.

Payment can be made by: check or money order (payable to TCC), MasterCard, Visa or Discover.

Course confirmations and e-course access codes are sent by e-mail.

Have questions? Call our Rider Education Program Office at (860)773-1446.
IMPORTANT!!

COURSE FEES ARE NON-REFUNDABLE.

Select your class dates carefully to ensure your ability to attend ALL SESSIONS of your class, on time. Any absence or tardiness will require you to register for another course, pay again, and start from the beginning. No exceptions. If you think you will miss a session due to a vacation, wedding, work, etc., DO NOT ENROLL IN THAT CLASS. Choose another.

Be Prepared! Learning to ride a motorcycle demands alertness and some physical exertion. Operating any vehicle (car, bicycle, or motorcycle) brings with it both responsibility and risk. The possibility of being seriously injured is always present. All students must sign a Waiver and Release of Liability form prior to participation. The form for students under 18 (Minor’s Waiver and Release of Liability) is available upon request and must be signed by both the student and a legal guardian.

Since the curriculum progresses at an aggressive pace, you should be aware of the following facts:

- Riding a motorcycle is much more difficult than riding a bicycle or operating a car. It involves a great deal of hand-eye coordination. You must have the capability to balance a heavy two-wheeled vehicle. You will be required to push a motorcycle. If necessary, please practice before attending.

- You need to attend class in good physical condition, be well-rested and alert, and participate in all sessions. You will also be required to read and study the provided handbook. A portion of the workbook can be viewed on the Ride4Ever.org website.

- Realize that not everyone successfully completes this course. However, our students leave the course with a better understanding of how motorcycles interact with traffic and the environment, and their responsibilities as a rider.

- Unfortunately, during the course, you may discover, or be told, that riding motorcycles is not for you. For your safety and the safety of others, the instructor may not allow you to continue.

The course is conducted in all weather conditions (rain, heat, cold, etc.); rarely do we cancel.

Please come to each session prepared with:
- rain gear (no ponchos)
- weather appropriate clothing
- plenty of water
- lunch
- snacks

Refunds are not issued unless a course is cancelled. A course may be rescheduled or cancelled due to insufficient enrollment or other unforeseen circumstances.

Note: Students may use their own scooter, provided it is registered as a motorcycle with the CT DMV, 250cc or less, street-legal, and in safe operating condition.

For more information about the Connecticut Motorcycle Rider program, please visit Ride4Ever.org
# Connecticut Rider Education Program Registration Form

**COURSE:**
- [ ] BRC (Basic)
- [ ] Semi/Private
- [ ] ERC (Experienced)
- [ ] RRC (Returning)

**LOCATION:**
- [ ] Farmington
- [ ] Stratford
- [ ] Fairfield
- [ ] East Granby

Full Legal Name: ____________________________

(Last) (First) (Middle)

NAME AS IT APPEARS ON LICENSE (required):

Driver’s License #: ____________________________
State: ______ Exp. Date: ____________________________

Address: ____________________________

(Street) (City) (State) (Zip)

Email Address: ____________________________

Phone: ____________________________

☐ Work or ☐ Cell Phone: ____________________________

Date of Birth: ____________________________

Gender: [ ] Male [ ] Female

Social Security #: ____________________________

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### Choice

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**PAYMENT INFORMATION:**

Check Number ____________________________

Money Order ____________________________

(Payable to Tunxis Community College)

MasterCard/Visa/Discover: ____________________________

Exp. ____________________________

Cardholder Name: ____________________________

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**INSURANCE INFORMATION:**

Required for ERC and all personally owned Scooters ONLY

Is license endorsed for motorcycle? [ ] Yes [ ] No

Insurance Provider: ____________________________

Policy #: ____________________________

Expiration Date: ____________________________

If permit only, expiration date: ____________________________

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*I certify that the statements made on this registration form are complete and true to the best of my knowledge.

(If MINOR (under 18 years of age), signature of parent or legal guardian required below.)

Signature: ____________________________

Date: ____________________________

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**OFFICE USE ONLY**

Banner ID: ____________________________

Rescheduling Fee: $40.00 Date: ____________________________

Confirmation sent [ ] Date: ____________________________

Fee pmt method: ____________________________

Entered into DOT [ ] Date: ____________________________
**CONNECTION RIDE REDECCATION PROGRAM Wdecay AND RELEASE OF LIABILITY – ADULT**

1. **Acknowledgement of potentially dangerous activity**
   I understand and am aware that participation in the motorcycle rider education course sponsored by the State of Connecticut is a potentially hazardous activity. I also understand that this participation involves a risk of injury and even death and that I am voluntarily participating in these activities and using equipment and/or machinery with knowledge of the dangers involved. Examples of the inherent risks involved are: I may forget how to brake or otherwise slow or stop the bike when I need to; I may accelerate without intending to; the bike may fall on me or otherwise strike me; another participant or his/her bike may hit me; I may panic and not do what I was instructed to do.

   These risks and dangers may result due to no one’s negligence or be caused by my own actions or the actions of other participants. It is further acknowledged that there may be risks and dangers not known to us or that are not reasonably foreseeable at this time. **PARTICIPANT, PLEASE INITIAL ________**

2. **Personal Responsibility**
   I am voluntarily participating in the motorcycle rider education course. I agree to use due care and common sense when participating in this course and performing these activities, including not participating while under any impairment which would interfere with my physical or mental abilities. I agree to let the instructor/person in charge know if I see or feel that something is dangerous or that I am not able to safely do something. While an instructor may encourage me to attempt an activity, I understand that I am best able to judge whether I can do it safely. I should refuse to do an activity if I feel I cannot do it safely, even if it means that I cannot complete the course and will not receive reimbursement of the registration fee. The program strongly suggests that I obtain my own private insurance to cover any injuries I may sustain. **PARTICIPANT, PLEASE INITIAL ________**

3. **Release of Liability**
   In addition to the risks and dangers of injury inherent to this activity, there is also a risk and danger that may be caused by the negligence of others, including that of the releasees. I waive any and all liability for and cause of action for personal injury, property damage or wrongful death arising from my participation in this activity, including for claims of negligence, including the negligence, if any, of releasees. “Releasees” include the State of Connecticut, the Department of Transportation, the Motorcycle Safety Foundation, the host college, the course instructor, and all of these entities’ officers, agents, employees, representatives, executors or their successors. I hereby release and agree that I will not sue the releasees for any and all damage or injury to me or to my property. **PARTICIPANT, PLEASE INITIAL ________**

   I understand and assume the risks arising from participation in the motorcycle rider education course and understand that included within the scope of this waiver and release is any cause or action arising from the performance, or failure to perform maintenance, inspection, supervision or control of said areas/activities and for the failure to warn of dangerous conditions existing at said facilities, for negligent selection or hiring of anyone connected to with the activity, or negligent supervision or instruction by releasees. **PARTICIPANT, PLEASE INITIAL ________**

4. **FERPA Consent for Disclosure of Educational Records**
   In order to maintain accurate student records, and for other legitimate business purposes, I hereby authorize Tunxis Community College to release the CONREP/TXCC rider education registration and waiver forms to the DMV and DOT to ensure motorcycle endorsement confirmation. **PARTICIPANT, PLEASE INITIAL ________**

5. **Refund/Rescheduling Policy**
   I understand that the Motorcycle Rider Education course fee is non-refundable. Rescheduling may be allowed, one time only, at the discretion of the Continuing Education Office, and requires two weeks’ notice prior to the start of the originally scheduled class. A $40 fee will be charged. **PARTICIPANT, PLEASE INITIAL ________**

   Notice to participants: Although a fee is charged for this course, it is being offered at low cost and no profit for purposes of promoting safety and enjoyment of riding. This course is fulfilling a community need by offering a program not easily or otherwise available in the private sector or only available at higher cost in the private sector. Please note that your information will be shared with the Department of Transportation.

   **I acknowledge that I am 18 years of age or older and that I have read and understood the above paragraphs.**

   ___________________________ ________________  ___/____/_____
   Participant – Signature Print Name Date