



# GOLD WING ROAD RIDERS ASSOCIATION



## RIDER EDUCATION PROGRAM RIDER COURSE INSTRUCTOR RENEWAL and ICC APPLICATION

Renewal \_\_\_\_\_ Certification Update \_\_\_\_\_ Course I am applying to be certified in: \_\_\_\_\_

Name \_\_\_\_\_ GWRRR # \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State / Province \_\_\_\_\_ ZIP / Postal Code \_\_\_\_\_

Phone (Home) \_\_\_\_\_ Phone (Cell) \_\_\_\_\_

Email \_\_\_\_\_

GWRRR Inst # \_\_\_\_\_ Exp Date \_\_\_\_\_ CSC # \_\_\_\_\_ Exp Date \_\_\_\_\_

ESC # \_\_\_\_\_ Exp Date \_\_\_\_\_ MSF # \_\_\_\_\_ Exp Date \_\_\_\_\_

Current Rider Course Certifications (If any)

Rider Course Instructor  Master Instructor  Date of Initial GWRRR Certification \_\_\_\_\_

ARC \_\_\_\_\_ Date Certified \_\_\_\_\_ Certified By: \_\_\_\_\_

TRC \_\_\_\_\_ Date Certified \_\_\_\_\_ Certified By: \_\_\_\_\_

TC \_\_\_\_\_ Date Certified \_\_\_\_\_ Certified By: \_\_\_\_\_

TTRC \_\_\_\_\_ Date Certified \_\_\_\_\_ Certified By: \_\_\_\_\_

SRC \_\_\_\_\_ Date Certified \_\_\_\_\_ Certified By: \_\_\_\_\_

Other Certifications (Not GWRRR):

1 \_\_\_\_\_ Date Certified \_\_\_\_\_ Certified By: \_\_\_\_\_

2 \_\_\_\_\_ Date Certified \_\_\_\_\_ Certified By: \_\_\_\_\_

**List Courses Taught for GWRRR in the past two years (include ARC-R and TRC-R)  
CLASSES TAUGHT FOR YOUR STATE AGENCY DO NOT COUNT FOR GWRRR RENEWAL.**

Course	Year	How Many	Course	Year	How many
ARC / ARC-R	_____	_____	TTRC	_____	_____
TRC / TRC-R	_____	_____	SRC	_____	_____
TC	_____	_____	AORC	_____	_____

BY SIGNING THIS APPLICATION/RENEWAL:

- I AGREE TO UPHOLD AND IMPLEMENT ALL CONCEPTS, IDEALS, AND INSTRUCTOR PREREQUISITES OF THE GWRRR INSTRUCTOR PROGRAM.
- I AGREE TO COORDINATE ALL COURSES THROUGH MY DISTRICT EDUCATOR.
- I AM CURRENT AT LEVEL III OR ABOVE IN THE RIDER EDUCATION LEVELS PROGRAM.
- I ALWAYS RIDE IN PROPER RIDING GEAR.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**RETURN THIS APPLICATION 30 OR MORE DAYS PRIOR TO YOUR SCHEDULED INSTRUCTOR CERTIFICATION CLASS OR YOUR INSTRUCTOR EXPIRATION DATE.**

**THIS APPLICATION GOES TO YOUR DISTRICT EDUCATOR.**

**The District Educator will forward it to:**

TEAM GWRRR RIDER EDUCATION ASSISTANT

CHUCK & MELANIE GEGGIE

2208 OXFORD TRENTON RD., OXFORD, OH, 45056

cwgeggie@gmail.com

513-312-0224