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BULLETIN NO. 12/13-004 DATE: 24 SEP 12

TO: All ISR Racing Affiliates

SUBJECT: RACE DIRECTOR AND TECHNICAL DIRECTORS SCHOOL

SATURDAY, OCTOBER 27, 2012 9:00 AM to 6:00 PM Best Western Milwaukee Airport Hotel 5105 So. Howell Ave. Milwaukee, WI 53207 Phone No. 414-769-2100

Please respond to this email or fax this form to ISR with names of your officials who plan to attend. RSVP by October 15, 2012 to insure your reservation at the school.

Tom Zernia has announced the 2012 Race Director and Technical Director School will be held as shown above. This will be a hands on school with four major sessions. These sessions will be as follows:

SESSION 1: All four manufacturers have a 120/4 stroke snowmobile. Briggs & Stratton has entered into the 120/4 stroke racing program with a spec engine. This session will be held by Scott Minzenmeyer, President of Recreational Motorsports and an ISR contributor.

SESSION 2: New fuel testing standards are now in place. Fuel testing procedures and standards will be conducted by Terry Kumrow, ISR fuel specialist and technical data.

SESSION 3: Engine teardown procedures and methods including CC'ing procedures. This session will be conducted by Mike Benoy, President of International Watercross Association and ISR race rules.

SESSION 4: Finally, a seminar on Race Procedures, Race Preparation, ISR insurance requirement waivers, accident procedures, etc. This seminar will be held by Jerry Korinek, ISR Rules and ISR Race Rules.

THIS IS A MUST ATTEND SCHOOL.

The school is open to two representatives from each affiliate group. If you wish to have more than two people attend, contact the I.S.R. office for prior authorization. Your organization's participation in this school is the only way to insure fair and proper enforcement of race rules as published in the I.S.R. Yearbook and race rules enforcement is required by the I.S.R. insurance program.

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AFFILIATE NAME		ISR affiliation no.	
ATTENDEE #1		ATTENDEE #2	
NAME		NAME	
ADDRESS		ADDRESS	
CITY, STATE, ZIP		CITY, STATE, ZIP	
PHONE		PHONE	
EMAIL		EMAIL	

ATTENDEE #3		ATTENDEE #4	
NAME		NAME	
ADDRESS		ADDRESS	
CITY, STATE, ZIP		CITY, STATE, ZIP	
PHONE		PHONE	
EMAIL		EMAIL	

PLEASE FAX THIS FORM TO 262-335-9440 OR EMAIL YOUR RESPONSE AS SOON AS POSSIBLE TO <u>isr1 @att.net</u>. THANK YOU.

