

**BULLETIN NO. 13/14-004****DATE: 30 SEP 13****TO: All ISR Racing Affiliates****SUBJECT: RACE DIRECTOR AND TECHNICAL DIRECTORS  
SCHOOL (New Hotel Location)****SATURDAY, NOVEMBER 2, 2013****9:00 AM to 6:00 PM****Crowne Plaza Milwaukee Airport Hotel****6401 South 13<sup>th</sup>, Street****Milwaukee, WI 53221****Phone No. 414-674-5300**

**Please respond to this email or fax this form to ISR with names of your officials who plan to attend. RSVP by October 18, 2013 to insure your reservation at the school.**

2013 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: 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, ISR race rules.

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

**International Snowmobile Racing, Inc.**

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

<b>ATTENDEE #3</b>		<b>ATTENDEE #4</b>	
NAME		NAME	
ADDRESS		ADDRESS	
CITY, STATE, ZIP		CITY, STATE, ZIP	
PHONE		PHONE	
EMAIL		EMAIL	

**PLEASE FAX THIS FORM TO 715-479-8947 OR EMAIL YOUR RESPONSE AS SOON AS POSSIBLE TO [todd@isrracing.org](mailto:todd@isrracing.org) THANK YOU.**