USA Cycling Mechanic Upgrade Form

This form is to be used for licensed mechanics upgrading from category four to category three.
Please print out both pages of this form and fill in all spaces.

Requirement #1 -Mechanic's License

Current USAC Category Four License Number:

Requirement #2 - Bill Woodul Mechanics' Clinic

Date attended the Bill Woodul Mechanics' Clinic in Colorado Springs, CO:

Requirement #3 - Driver's License

Driving License Number: State: Exp Date:

Requirement #4 - 10 Events

Event 1

Event Name: _____ Event Date: _____ # of Days: ___

Program Name: _____ Program Contact: _____

Program Type: Neutral ☐ Team ☐ Proof of Service: Phone Number ☐ Letter Attached ☐

Event 2

Event Name: _____ Event Date: _____ # of Days: ___

Program Name: _____ Program Contact: _____

Program Type: Neutral ☐ Team ☐ Proof of Service: Phone Number ☐ Letter Attached ☐

Event 3

Event Name: _____ Event Date: _____ # of Days: ___

Program Name: _____ Program Contact: _____

Program Type: Neutral ☐ Team ☐ Proof of Service: Phone Number ☐ Letter Attached ☐

Event 4

Event Name: _____ Event Date: _____ # of Days: ___

Program Name: _____ Program Contact: _____

Program Type: Neutral ☐ Team ☐ Proof of Service: Phone Number ☐ Letter Attached ☐

Event 5

Event Name: _____ Event Date: _____ # of Days: ___

Program Name: _____ Program Contact: _____

Program Type: Neutral ☐ Team ☐ Proof of Service: Phone Number ☐ Letter Attached ☐

Event 6

Event Name: _____ Event Date: _____ # of Days: ___

Program Name: _____ Program Contact: _____

Program Type: Neutral ☐ Team ☐ Proof of Service: Phone Number ☐ Letter Attached ☐

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Event 7

Event Name:		Event Date:		# of Days:	
Program Name:		Program Contact:			
Program Type:	Neutral ☐ Team ☐	Proof of Service:	Phone Number ☐ Letter Attached ☐		

Event 8

Event Name:		Event Date:		# of Days:	
Program Name:		Program Contact:			
Program Type:	Neutral ☐ Team ☐	Proof of Service:	Phone Number ☐ Letter Attached ☐		

Event 9

Event Name:		Event Date:		# of Days:	
Program Name:		Program Contact:			
Program Type:	Neutral ☐ Team ☐	Proof of Service:	Phone Number ☐ Letter Attached ☐		

Event 10

Event Name:		Event Date:		# of Days:	
Program Name:		Program Contact:			
Program Type:	Neutral ☐ Team ☐	Proof of Service:	Phone Number ☐ Letter Attached ☐		

Note: A mechanic can use a maximum of three events as a neutral mountain bike mechanic, a maximum of four days of stage race work, a maximum of two events run by USA Cycling regional coaches and a maximum of two sessions at the USA Cycling headquarters. Seven days at USAC counts as one session.

Note: This form must be mailed along with any letters or other articles to USA Cycling. This form will not be accepted by fax or email.

Mailing Address and Contact Information

USA Cycling
Attn: Head Mechanic
210 USA Cycling Point, Ste. 100
Colorado Springs, CO 80919

USA Cycling at (719) 434-4200 or see www.usacycling.org/mechanics