

TO: All Riders

RE: 2025 American Flat Track Series Rider Baseline Testing Requirement

In order for a competition license application to be considered, each rider must provide documentation that they have completed an ImPACT Concussion Management Test, recognized by AMA Pro Racing. This test shall be used to assist in determining when a rider will be allowed to return to competition after suffering a concussion.

A test is considered current for two seasons of competition following the date the test is completed. If a test is completed during a competition season, the test will be current for that season and the next season immediately thereafter. If completed prior to the start of a competition season, the test will be current for the first season beginning immediately after and the following season.

## Where do I get a baseline test?

1. A test may be completed online at <u>BaselineTesting.com</u>. If done online, please email the confirmation page to smcmillan@amaproracing.com.

OR

2. From Provider of your choice.

## What do I send to AMA Pro Racing?

Riders will need to complete the AMA Pro Racing Baseline Testing Submission form and follow its instructions. If you have any questions, please contact the Competition Department at 386-492-1014 Ext. 151.

## **BASELINE TESTING SUBMISSION FORM**

## PLEASE TYPE OR PRINT

Data of Births	,	Δ		
Date of Birth://		Age:		
Cell Phone:				
	ImPACT Test Ir	nformation		
My Baseline was performed by	y:			
Printed Name of Credentialed ImP	ACT Consultant	Date		
Signature of Credentialed ImPACT	Consultant	Dat	9	
Should a copy be necessary fonces per any request from a t	or evaluation and/or tre	eatment, a copy w e following locatio	ill be on file and n:	
Should a copy be necessary fonces per any request from a t	or evaluation and/or tre creating physician at the	eatment, a copy w e following locatio	ill be on file and n:	
Should a copy be necessary for nours per any request from a toward	or evaluation and/or tre creating physician at the	eatment, a copy we following location	ill be on file and n:	
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Should a copy be necessary for nours per any request from a towards	or evaluation and/or treating physician at the	eatment, a copy we following location	ill be on file and n: Zip	
Should a copy be necessary for nours per any request from a toward state of the sta	or evaluation and/or treating physician at the state  State  Weeken	eatment, a copy we following location	ill be on file and n:  Zip	
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If you have any questions, please contact AMA Pro Racing

David McGrath – 525 Fentress Blvd, Suite B – Daytona Beach, Florida 32114

Phone: 386-492-1014, Ext. 151 Fax: 386-274-2335