



A.B.A.T.E. of Minnesota Young Riders Scholarship Program

**WARNING: If you are applying for a scholarship, DO NOT register! We will do that for you.
(You may be subject to college cancellation fees if you do)**

A.B.A.T.E. of MN is a non-profit motorcycle rights organization that stands for **American Bikers** for **Awareness, Training, and Education**. Our organization promotes motorcycle crash prevention through motorcyclist safety awareness, training, and education.

A.B.A.T.E. is currently funding a scholarship program to pay for the cost of attending rider training courses. These funds are limited and will be approved based on application date and required criteria until all available scholarships have been awarded.

Why should you consider taking a rider training course? We believe that continued motorcycle training is key to building the proper foundation of good riding habits and better rider skills to create the best overall motorcycling experience. Taking annual training courses is key to refreshing your skills, maintaining your riding ability, and improving your overall skillset.

What better investment can you make than yourself? What better pay off can you have than attending a free rider training event while possibly earning your motorcycle permit or endorsement?

The application requirements of the A.B.A.T.E. scholarship training program include:

- Be at least 15 years of age (and under 21 years of age) with at least a valid Driver's License permit at the time you apply
- Have a valid Minnesota Driver's License prior to attending a course
- Meet the Minnesota Motorcycle Safety Center requirements for attending a course

Scan and email applications to [ridertraining@abatemn.org](mailto: ridertraining@abatemn.org)

**WARNING!! If you are applying and are eligible for this scholarship,
DO NOT register for a course. Non-refundable College fees may occur.**

A.B.A.T.E. of Minnesota will register you.



A.B.A.T.E. of MN Young Riders Scholarship Application



Location of Course: _____

Course Description: _____

Date & Time of Course: _____

First Name: _____

Last Name: _____

Street Address: _____

City: _____

State: _____

ZIP Code: _____

Email Address: _____

Phone #: _____

Driver's License #: _____

Date of Birth: _____

What prompted you to take a rider training course?

To apply, send to ridertraining@abatemn.org