You should read and understand the enclosed notes before filling in this form



2016 ACU Competition Licence Road Race, Scooter Road Race, Parade, Drag, **Sprint & Hillclimb, Supermoto, Pocket Bike**

If you have any questions, regarding this form, please contact the ACU on 01788 566417

If this is your first Application

AFFIX YOUR PHOTO HERE

Please write your

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Contact details in case of emer	rgen	icy:																				
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FIM Non Championship Rider FIM Non Championship Sidecar Driver	\vdash					£30																
FIM Non Championship Passenger						£30																
Fee is £25 for 8 year olds and belo		licatio	on The	are aff	for f7	' earl	7															
ntermediate Novice over 18 y								Lice	nce			Total	pay	/able	•	£						
Section 2 - Paym	er	nt	- Yo	ou n	nus	t c	omp	olete		is s	sec	ction										-
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ardholder's name:								Cardl	nold	er's s	sigr	nature:										

Section 3 - Medical info	rmation - You must o	complete thi	s section	
Please answer all the questions truthfully. A false de Have you ever suffered from or are you currently su	eclaration may have serious consequifering from any of the following illne	uences. esses or conditior	ns:	
Epilepsy, fits, blackouts or any condition which				Yes No
2. Any condition which might cause dizziness, ver	tigo or loss of balance?			Yes No
3. Any mental or brain disorder such as a stroke,				Yes No
4. Any condition or operation (including spleen remo				Yes No No
5. Any psychiatric or emotional illness or any alco6. Diabetes? If 'Yes' please state whether treated				Yes No No
If 'Yes' then section 4 – Eyesight Report and se				103 🗀 140 🗀
7. Any condition affecting your vision or eyes, incl				Yes No
8. Have you been unconscious because of a head			Yes No	
9. Any loss of strength, feeling, control or movement			Yes No No	
10. Amputation of any part of your limbs with or wit	•			Yes No No
11. Any kind of tumour or cancer?			Yes No	
12. Are you taking any medication? (include all tablets, medicines etc. whether pres			Yes No No	
specialists you have seen, hospitals you have atte medical report will be required yearly/annually. If the required annually dependant on the exact nature of matters.aspx	nis is the first time you have answere	ed 'yes' to question	ons 7-12, a medical rep	ort may be
Signature:	Print Name:		Date	:
Section 4 - Eyesight Rep	ort - Only required if:	:		
You are a Road Race, Scooter Road Race or Parad renewing and your last eyesight report was 3 years You are applying for an International licence	· · · · · · · · · · · · · · · · · · ·		ter Road Race or Para ou are being treated fo	
To your doctor or optician Please read these notes before filling in this section The minimum corrected visual acuity must be 6/ degrees along the horizontal meridian with no defect examination rather than automated perimetry testing distinguish the primary colours red and green.	6 with both eyes open together. The ts within the central 20 degrees. This	ne minimum bino s should be a sin	cular field should meas	al field in that they can
1. Uncorrected vision: Right eye:	6 / Left eye:	6 /	Binocular:	6 /
2. Corrected vision: Right eye:	6 / Left eye:	6 /	Binocular:	6 /
3. Is the applicant's colour vision normal?	Yes	No 📗	_	
4. Does the binocular field of vision comply with	the above? Yes	No 🗌		
Please use this space to give further details:			address of optician/ e official stamp)	doctor
Applicant's name: Signature of optician/doctor:		Date:		
Please	de net vivite in t			

Section 5 - Medical Report - only r	equired if:					
Please note it could be 3 weeks before licence is issued						
You are aged 70 or over and / or you are being treated for diabe	tes and / or you are applying for a	an International licence				
To your doctor						
Please read these guidance notes before filling in this section for the at The person to be examined is applying for a licence to compete in mote	oplicant whose name is on the front of the	nis form. uld be taken to ensure that the				
applicant does not suffer from any condition which might result in sudde	en loss of control of his/her motorcycle the	hus endangering other riders, officials				
and spectators. The controls of a motorcycle normally require the use of under fierce acceleration and braking forces. Competition places both p	of all four limbs. The applicant must be a physical and mental demands on the ride	ble to control his/her motorcycle				
Limbs: The applicant should have sufficient power, co-ordination and s	ensation in his/her limbs to maintain full	control of his/her machine.				
An applicant with an organic or functional loss of a limb or part of a liml "on track" assessment.	o may be referred to an ACU medical pa	nel and be subject to				
Deafness: A licence can be issued to an applicant with impaired hearing						
<u>Diabetes:</u> A well controlled diabetic may be passed as fit to compete. General Practitioner/regular medical attendant if are not under consulta	They require evidence from their Consul	tant Diabetologist, or their own				
to hypoglycaemic or hyperglycaemic attacks (no significant episodes in	preceding year), that they have no neur	ological or ophthalmic complication				
associated with diabetes and that they understand their diabetes, its me Cardio-vascular system: In general, a heart attack or serious cardio-vasc	onitoring and management.					
should be paid to blood pressure and cardiac rhythm disorders. In such case	ses a certificate from a Cardiologist includi	ng the results of any test the Cardiologist				
considers necessary, must be submitted with the Medical Report form. Any ride with the exception of Trial, must have an exercise tolerance electrocar						
at least every 3 years. In Trial, an exercise tolerance electrocardiogram is req	uired for any rider over 50 years if there are l	known significant risk factors for or history				
of cardiac disease. Neurological and psychiatric disorders: In general applicants with a se	prious paurological or psychiatric disorder w	vill not be granted a licence				
Fits or unexplained loss of consciousness: A licence will not be issu						
suffered an unexplained loss of consciousness.						
Are you the applicant's regular medical attendant?		Yes No				
2. Does the applicant have epilepsy, diabetes or any condition which m	ay cause loss of consciousness?	Yes No				
3. Does the applicant have any condition which may cause sudden loss	s of balance or co-ordination?	Yes No				
4. Is there evidence of any progressive neurological disorder?		Yes 🔲 No 🖳				
5. Are there any signs of neoplasm which may be liable to metastasise	?	Yes 🔲 No 🖳				
6. Is there any evidence of any disease or condition affecting the eyes	Yes 🔲 No 🖳					
7. Is there any abnormality of power, sensation, co-ordination or mover	Yes 🔲 No 🖳					
8. Are any limbs or parts of limbs missing?	Yes 🔲 No 🖳					
9. Is there any abnormality of the heart?	Yes No					
10. Does the applicant have hypertension?						
If 'yes', do they meet DVLA LGV/PCV Group 2 entitlement requirement 180mmHg and/or diastolic greater or equal to 100mmHg. Answer n						
11. If the applicant has insulin dependent diabetes are there any signs of ne						
12. If the applicant has insulin dependent diabetes are there any signs of he						
13. Is the applicant suffering from any psychiatric illness?						
14. Is the applicant dependent on alcohol, drugs or other substances?						
15. Is the applicant taking medication?	the medication is not within the WADA p	rohibited classes of substances and				
prohibited methods. If the medication is banned and the applicant in TUE (Therapeutic Use Exemption) form will need to accompany the	s applying for an FIM World Champion is medical report. A TUE/WADA prohibite	ship or Prize Event licence, then a				
www.wada-ama.org or is available on request from the ACU.						
16. Is the applicant medically fit to hold a competition licence and 17. I am unsure of the applicant's fitness and wish to refer him / h	to participate in motorcycle sport? er to the ACU Medical Panel, please o	Yes No live details of the				
reason(s) that you are unsure of the applicant's fitness.						
Please use this space to give further details:		Name & Address of Doctor, including				
Thouse doe the space to give farmer detaile.		Qualifications & GMC number				
Please use offici						
Applicant's name:	Date of birth:					
Signature of doctor:	Date:					
Section 6 - Declaration & Acknowle	adagments - Ven must	complete this section				
		complete this section				
Please read all the following statements and so I understand that if I have given any false information in this applica	tion you may take disciplinary action aga	ainst me. This might include my				
licence being permanently withdrawn.		Ç ,				
 I will read and comply with the National Sporting Code and the Stan I understand that it is my responsibility to ensure that I have the con 		opetition I enter and that my				
licence/registration card will not guarantee my entry into, or accepta	nce into, any competition.					
 I consent to the collection and retention of my personal information I consent to any necessary information concerning an injury at an error 		/naramedic/first_aider to the Clark				
of the Course or incident officer of the event and also to my own do	ctor and my relatives. The doctor may al	Iso give information to other				
persons, according to the doctor's own professional ethical code.	,,,,,,,,	-				
 Acknowledgement and Agreement of the FI I, as a member of the ACU and/or a competitor in an ACU or FIM au 						

I undertake to familiarise myself with the FIM Anti-Doping Rules. I consent and agree to comply with and be bound by all of the provisions of the FIM Anti-Doping Rules, including but not limited to, all amendments to the Anti-Doping Rules and all International Standards incorporated in the Anti-Doping Rules. I acknowledge and agree that the FMNs and the FIM have jurisdiction to impose sanctions as provided in the FIM Anti-Doping Rules. I also acknowledge and agree that any dispute arising out of a decision made pursuant to the FIM Anti-Doping Rules, after exhaustion of the process expressly provided for in the FIM Anti-Doping Rules, may be appealed exclusively as provided in Article 13 of the FIM Anti-Doping Rules to an appellate body and in last instance for final and binding arbitration to the Court of Arbitration for Sport. I acknowledge and agree that the decisions of the arbitral appellate body referenced above shall be final and enforceable, and that I will not bring any claim, arbitration, lawsuit or litigation in any other court or tribunal. I have read and understand this Acknowledgement and Agreement.

cknowledgement of the risks of motorsport Motorsport is an extremely dangerous activity. It is important that all competitors think very carefully about the risks they are undertaking whenever they compete. It must be recognised by all competitors that there will be accidents and that a number of competitors may die, whilst others may be permanently disabled or sustain serious injuries **and it could be you.** All competitors must appreciate that they participate in motorsport entirely at their own risk. One of the main risks in motorsport is obviously speed. Situations which would not give rise to major danger at low speed can have extremely serious consequences at high speed and in a competitive environment. While the organisers will do their reasonable best to make the event as safe as possible, there will inevitably be occasions when mistakes are made. It must, however, be recognised by all competitors that where an accident occurs in such circumstances, any fault on the part of the made. It must, however, be recognised by all competitors that where an accident occurs in such circumstances, any fault on the part of the organisers will not be the principal cause of any serious injury sustained. The dominant cause of any serious injury will be the fact that the accident happened at speed in a competitive environment. The risk of accidents is one of the inherent risks involved in motorsport and every competitor must consent to this. The ACU is not prepared to accept personal injury claims (other than those covered under the Personal Accident Policy brought by competitors who have willingly participated in what they know to be a dangerous sport. Any claims will be vigorously defended, and this form will be used as evidence of the competitor's acknowledgement of the risks inherent in motorsport and that the dominant cause of any serious injury will be his/her voluntary decision to engage in competitive sport rather than any alleged negligence by the ACU or any other party involved in staging the event. **Declaration** I have read and understood this form. very serious injury.

I understand that by taking part in motorsport I am exposing myself to a risk of death, becoming permanently disabled or suffering some other I acknowledge that even in the event that negligence on the part of the ACU, any other governing body, any race organiser, any circuit owner, or any individual who is employed by or carries out duties on behalf of any of these entities, were to be a contributory cause of any serious injury I may suffer, the dominant cause of any serious injury will always be my voluntary decision to take part in a high risk activity. I accept that insurance arranged on my behalf by the organisers of events that I may enter specifically excludes liability between the participants.
I understand that this form may be used in litigation as evidence that any serious injury will be principally the result of my voluntary decision to engage in a high risk activity. I acknowledge that my participation in motorsport is entirely at my own risk. First application – please remember to attach a photograph, and if Under 18 a copy of Proof of Age Complete payment details or enclose a cheque Note - Licence cards need to be presented at Events. Date: Your signature: All competitors under 18 years of age must be accompanied to each event by their Parent or Person with Parental Responsibility. The Parent or Person with Parental Responsibility must attend signing on and be present for the duration of the event. **Declaration in respect of minors under the age of 18**I have read and understood the "Acknowledgement of the risks of motorsport" which appears above. I appreciate the dangers inherent in motorsport which include the risk of death or permanent disablement. The minor does not suffer from any physical, medical or mental disability which would make it unsafe for him/her to participate as a competitor. I accept that it is my responsibility to ensure that the minor and I have read and understood the National Sporting Code of the ACU, Standing Regulations, Supplementary Regulations and Final Instructions subsequently issued and Entry Forms and that he/she will comply with them. I accept that photographs or video footage may be taken of my child by officials dealing with safety issues or accident investigations. Photographs may also be taken for promotional purposes and may appear on the ACU website or in ACU publications. To the best of my knowledge and belief the minor possesses the standard of competence necessary for events of the type to which his/her entries relate and that the machines entered will be suitable, safe and will comply with the Regulations for those events Parents / Person with Parental Responsibility name: Signature: Relationship to applicant: Date: ACU Club Membership (applicable to all applicants). I am / my child is a current member of the ACU affiliated club stated below: Please do not send this form to us unless you have acquired your unique club membership code. Name of Club: Unique Club Membership Code issued by Club: For 2016 Code starts 16

Section 7 - Road Race Course & Assessment - First time applicants and

Lapsed Licence* holders

Competitor Training Course - To be complete by all first time applicants for Road Race Rider, Sidecar Driver, Sidecar Passenger, Scooter and all Lapsed* Licence holders.

Basic Rider Assessment - To be completed by all first time applicants for Road Race Rider, Sidecar Driver, Scooter, Lapsed* Novice/Intermediate Novice Road Race Rider and Lapsed Novice Sidecar Driver licences.

*Lapsed Licence holder, is a rider who has not renewed their race licence for more than 5 years.

FOR CLUB USE ONLY

PRINT NAME

Competitor Training Course & Basic Riding Assessment

Club Official Stamp:

Competitor Training Course Only

Club Official Stamp:

Date of Course

Basic Riding Assessment Only

Club Official Stamp:

Please note:

You will have 1 year from the date you attend the **Competitor Training** Course to apply for your Competition

From time to time we will contact you with official information, offers and promotions from ACU Ltd and ACU Events Ltd. Your details will not be passed on to any third party. If you do not wish to receive this information please tick this box:

Please return this form, your payment, and any other information you have to provide, to us.

Licence Department, Auto-Cycle Union Ltd, ACU House, Wood Street, Rugby, Warwickshire CV21 2YX ACU and The Auto-Cycle Union are trading names of The Auto-Cycle Union Limited registered under Company No 00134679;

Registered Office: ACU House, Wood Street, Rugby, Warwickshire CV21 2YX