

MONTHLY INSURANCE STATEMENT SUMMARY

Non-Road Race Activities

Permits issued by Local Centre

Auto-Cycle Union Ltd, ACU House, Wood Street, Rugby, Warwickshire CV21 2YX Tel: 01788 566400 Fax: 01788 573585 E-mail: admin@acu.org.uk

Within 30 days of the end of the calendar month, this form must be sent to ACU Head Office, at the above address with the insurance payment.

DECLARATION FOR THE MONTH OF: Year:						
Number of signed-on Of	ficials and Assistants	:				
		Riders aged 16 ye	ars and over:	@	£	£
				@	£	£
				@	£	£
				@	£	£
		Passengers aged	16 years and over:	@	£	£
				@	£	£
		Riders aged unde	16 years:	@	£	£
				@	£	£
				@	£	£
		Trials Riders Assis	stants (see notes):	@	£	£
Youth MX events only:		BYMX Competition	n Licence holders:	@	£	£
		Others:		@	£	£
					SUB TO	TAL: £
				LESS 39	% EXPEN	SES: £
Foreign riders and passengers without evidence of FIM cover:				@	£ 80.00	£
Foreign riders and passengers participating in Trials only without Start Permission or evidence of FIM Cover:				@	£20.00	£
Foreign riders and passengers with Start Permission and evidence of FIM cover: (foreign riders with official start permission from their FMN (including MCUI) pay normal per capita ra						£
Contractual Liability cover beyond policy limits:				.es)		£
TOTAL INSURANCE PAYMENT: £						
CLAIMS CONTINGENCY & LEGAL EXPENSES FUND Total number of adult and youth riders and passengers: @ 50p £						
			passage.s.			
SUB TOTAL: £						
TRIALS LEVY total number of riders and passengers@ £2.00: £						
Declarations enclosed (list permit numbers below):						
				1		
Cancelled Permits during	g this month (list pern	nit numbers below):				
Cancelled Permits during	g this month (list pern	nit numbers below):				