MOTORCYCLE OFF ROAD 2021 - EVENT ENTRY FORM PREMIEF



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 Tel: 01788 566400

Organisers:

Date of Event:	Permit No: ACU	Course Licence or Certificate No.	(where applicable):

This event is held under the National Sporting Code of the Auto-Cycle Union, the Standing Regulations, Supplementary Regulations and any Final Instructions issued. The ACU National Sporting Code and Standing Regulations are published annually in the ACU Handbook

ENTRY DECLARATION: I the undersigned apply to enter the event described above and in consideration thereof: -

- I declare that I have had the opportunity to read, and that I understand the National Sporting Code of the ACU, the ACU Standing Regulations, such Supplementary Regulations as have or may be issued for the event, and agree to be bound by them.
- I declare that I am physically and mentally fit to take part in the event and I am competent to do so. I confirm that I understand the nature and type of event I am entering and its inherent risks and agree to accept the same notwithstanding that such risks may involve negligence on the part of the organisers or officials.
- · I confirm that I am not currently suspended from ACU permitted competition or on the ACU Stop List as a result of incurring a Concussion injury.
- 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 consent to details of any injuries I may suffer at this event being passed between all medical services and the Clerk of the Course.
- I have read and understood The Auto Cycle Union Ltd Data Protection Policy and consent to the collection and retention of my personal information by the ACU.
- I confirm that the machine(s) as described below which I shall participate on shall be suitable and proper for the purpose. I confirm that I am eligible to compete on the machines for which I have entered.
- I confirm that if any part of the event takes place on a public highway, the machine(s) described below shall be insured as required by the Road Traffic Acts, or equivalent legislation, and that they will comply with the regulations in respect thereof.
- I accept responsibility for any items borrowed from the Organiser during the course of the event. These items include but are not restricted to (safety clothing, transponders, accessories). I understand that I am liable for the cost or replacement of any items lost or not returned and non-payment or non-replacement of items borrowed may affect my entry into subsequent events.
- I confirm that I have not been refused an ACU Licence, nor had an ACU Licence suspended, nor have I been excluded from any ACU competition.

Covid-19

- · I acknowledge the Organisers are operating this event in accordance with Government guidelines, advice and instruction so as to minimise the risk to Competitors, Marshals and Officials and the public from Covid-19.
- · By participating in this event, I will take all necessary steps to protect myself and others from the risk of infection. I agree to follow and abide by any instructions set down by the Organiser in an effort to minimise the risk of the Covid-19 virus.
- $\dot{}$ I acknowledge and accept the underlying and unavoidable risk of infection from the Covid-19 virus.

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ACKNOWLEDGEMENT OF THE RISKS OF MOTORSPO permanently disabled or suffering some other serious injury and I acknow circuit owner, the promoter, the organising club, the venue owner, or any in may suffer, the dominant cause of any serious injury will always be my volur I have read the above and acknowledge that my participation in me by "signing on" at the designated place before taking part in any Pro-	ledge that even in the event that negligence on the p dividual carrying out duties on their behalf were to be ntary decision to take part in a high risk activity. Intersport is entirely at my own risk. I agree that	part of the ACU, any event organiser, any a contributory cause of any serious injury
Participant's signature:	Please tick box if you are 18 years of age and over	
Passenger's signature:	Please tick box if you are 18 years of age and over	
FOR PARTICIPANTS UNDER AGE OF 18, DECLARATION	ON OF PARENT, PERSON WITH PAREN	TAL RESPONSIBILITY:
(COMPLETE IN BLOCK CAPITALS PLEASE) I participant, hereinafter referred to as 'my child', accept that my child may participant, hereinafter referred to as 'my child', accept that my child may participate as follows: I have read and understood the "Acknowledgement of which include the risk of death or permanent disablement. My child does not participate either as a Competitor or for Practice. I accept that it is my to participate in the properties of the practice of the practice of the practice of the practice.	rticipate in the aforementioned meeting. f the risks of motorsport" which appears above. I app not suffer from any physical, medical or mental disabilit	reciate the dangers inherent in motorspor by which would make it unsafe for him/her

which include the risk of death or permanent disablement. My child does not suffer from any physical, medical or mental disability which would make it unsafe for him/her to participate either as a Competitor or for Practice. I accept that it is my responsibility to ensure that my child and I have had the opportunity to read and understand the National Sporting Code of the ACU, Standing Regulations, Supplementary Regulations and Final Instructions subsequently issued and this Entry Form and that he/she will comply with them. I accept that photographs or video films 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.

Signature of **Rider's** Parent, Person with Parental Responsibility:

Signature of Passenger's Parent, Person with Parental Responsibility:	Date:
Full Name & Address	
Extract from NSC Article 7.14: A parent or legal quardian of a rider or passenger participating in a competition requiring consent is	deemed to hear mutual responsibili

with that competitor.

ENTRY DETAILS PLEASE FILL IN WITH BLOCK CAPITAL LETTERS

RIDER:	PASSENGER:			
Surname:	Surname:			
First name(s):	First name(s):			
Address:	Address if different to the Participant:			
Postcode: Tel:	Postcode: Tel:			
Date of Birth: Club:	Date of Birth: Club:			
ACU Licence / Registration No:	ACU Licence / Registration No:			

MACHINE Class Entered:	Make:	Capacity:cc	Stroke mm
Riding Number preferred: (where available) Transp	onder Number <i>(if applicable)</i> :	Entrant's Licence No (If ap	plicable):
PLEASE RETURN ENTRY FORM TO:			
Entry Fees for this event \pounds Plus if applicable: Transpor	nder Clip £ Transponder Hire £	TOTAL £	