This form, together with the appropriate payment (made payable to ACU Ltd), must be forwarded

## 2022 EVENT / INSURANCE STATEMENT

##### Road Race, Drag, Sprint and Hill Climb

##### (Non-Territorial and Territorial Clubs)

**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 14 days of the meeting to the ACU Road Race Department at the above address.

 Event name / title: …………… ……………………………… … Club / Organiser ………………………………………………………………

 Venue: ……………………………..……………………………… Date of event: ………………………………….…………………………….

 Status of event: ………………………….………………...…….. Permit No: **ACU** ………………...…………………………..…………..

 Duration of event ……………………………………………day(s) Number of spectators: ……………………….………………………………

 Number of signed on officials: ………………………….………… Centre: ………………………….………………...…………………………..

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Select event type** |  |  |  |  |
| **Road Race** **Permanent Circuits:** |  **Road Race** **Street Circuits:** | **Supermoto:** | **Hill Climb:** | **Drag Race:** |
|  |  |  |  |  |
| **Straight Line Sprint:** |  **Twisty Sprint:** |  **Parades:** |  **Test Day:** |  **Other:** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **1 Day** | **2 Day** | **3 Day** | **TOTAL** |
| **Adult Rider/Driver** |   | @ £ |   |  | @ £ |  |  | @ £ |  | £.…………………..…. |
| **Adult Passenger** |  | @ £ |  |  | @ £ |  |  | @ £ |  | £ .…………………..… |
| **Juniors under 16 yrs** |  | @ £ |  |  | @ £ |  |  | @ £ |  | £.…………………..…. |
| **Parade Rider** |  | @ £ |  |  | @ £ |  |  | @ £ |  | £.…………………..…. |
| **Parade Passenger** |  | @ £ |  |  | @ £ |  |  | @ £ |  | £.…………………..…. |
| **Test Day:** |  | @ £ |  |  | @ £ |  |  | @ £ |  | £.…………………..…. |
| **Other:** |  | @ £ |  |  | @ £ |  |  | @ £  |  | £.…………………..…. |

|  |  |
| --- | --- |
| **SUB TOTAL:** | **£** .…………………..…. |
| **LESS 1.5% EXPENSES:** | **£** .…………………..…. |
| **Foreign Riders\*:** | .……..… @ £ 3.00 | .……..… @ £ 3.00 | .……..… @ £ 3.00 | £ .…………………..…. |
| \*Foreign competitors without official start permission from their FMN (including MCUI) and a valid competition licenceare not allowed to compete without authorisation from the ACU Road Race Department. |  |
| **Contractual Liability cover beyond policy limits:** | £ .…………………..…. |
| **INSURANCE TOTAL:** | **£** .…………………..…. |
| CLAIMS CONTINGENCY & LEGAL EXPENSES FUND – This is the total number of adult, youth and passenger competitors including foreign riders. Do not include PR5 and PR6 Riders: | .………..… @ **50p** | **£** .…………………..….  |
| **TOTAL PAYMENT ENCLOSED:**(cheque to be made payable to ACU Ltd) | **£** .…………………..…. |

 **AUTHORISATION** (to be signed by Secretary of the Meeting and a Steward of the Meeting)

 Secretary of the Meeting: …………………………….………… Signature: ……………………………….…… Date: ………………….…...

 Address: …………………………………………………………………………………………………………………………………………………..

 Details confirmed as correct by Steward:-

 Steward: ……………………………………………….….……… Signature: …………………………..………… Date: ……………….……...

 Rowena Perks (Road Race only) (07805 898584)) Paul King (07767 635420) Alex Braddish (07827 985033)

Also advise ACU Headquarters – Tel: 01788 566400. FORM ACU/A5-2021

