



### ACU MOTORCYCLE OFF ROAD EVENT ENTRY FORM (PREMIER INSURANCE)

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

### Huddersfield Falcon M.C.C. Club Restricted Event.

**Date:** \_\_\_\_\_ **Name of the Event:** \_\_\_\_\_ **Permit number on Regulations: ACU**  
**Venue:** \_\_\_\_\_

*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 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.

**ACKNOWLEDGEMENT OF THE RISKS OF MOTORSPORT:** I understand that by taking part in this event I am exposed to a risk of death, becoming permanently disabled or suffering some other serious injury and I acknowledge that even in the event that negligence on the part of the ACU, any event organiser, any circuit owner, the promoter, the organising club, the venue owner, or any individual carrying out duties on their behalf 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 have read the above and acknowledge that my participation in motorsport is entirely at my own risk. I agree that I am required to register on arrival by "signing on" at the designated place before taking part in any Practice Session or Race.*

**Participant's signature:** ..... Please tick box if you are 18 years of age and over

**FOR PARTICIPANTS UNDER AGE OF 18:** - I accept the above conditions of entry to this event and give my approval:-

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

Full Name & Address .....

*Extract from NSC Article 7.15: A parent or legal guardian of a rider or passenger participating in a competition requiring consent is deemed to bear mutual responsibility with that competitor.*

*Participants under 18 years of age who cannot produce a valid ACU Competition Licence/Trials Registration must also complete a 'Parental Agreement form (Single Event)' in addition to this entry form*

### ENTRY DETAILS: - PLEASE FILL IN WITH BLOCK CAPITAL LETTERS

**ENTRY / FEES ENCLOSED: - £.....**

FULL NAME:	
ADDRESS:	
POSTCODE:	TEL No:
ACU REGISTRATION NUMBER:	DATE OF BIRTH:
MACHINE MAKE AND MODEL:	CAPACITY: cc

**CLASS:** Expert Intermediate Novice Beginner T/Shock 0/40 Pre 65 Youth Class: A B C D

**COURSE:** Hard 50/50 Easy White Route (Please circle to Indicate)

**Next of Kin:**

**(Name, Address & Tel. No):** .....