

2024 MOTORCYCLE SPORT EVENT ENTRY FORM

Road Race, Drag, Sprint, Hillclimb & Supermoto Events

AUTO CYCLE UNION	Road Race, Drag, Sprint, miliciniib & Supermoto Events
BIKESPORT OB	Auto-Cycle Union Ltd, ACU House, Wood Street, Rugby, Warwickshire CV21 2YX Tel: 01788 566400 E-mail: admin@acu.org.uk
Event: HILLCLIMB	Organisers: NHCA
Venue:WISCOMBE	Date of Event:18/05/2024
Permit No:202654	Course Lic/Cert No. (where applicable):058
 Instructions issued for the meeting. The ACU National Sportin ENTRY DECLARATION: I the undersigned apply to enter the event. I hereby declare that I have had the opportunity to read, and that I under Regulations as have or may be issued for the event, and agree to be bounted. I declare that I am physically and mentally fit to take part in the event entering and its inherent risks and agree to accept the same notwithstance. I confirm that I am not currently suspended from ACU permitted competitions. I accept that insurance arranged on my behalf by the organisers of ever form may be used in litigation as evidence that any serious injury will be precised. I consent to details of any injuries I may suffer at this event being passed. I consent to the collection and retention of my personal information by the I confirm that the machine(s) as described below which I shall participate machines for which I have entered. I confirm that if any part of the event takes place on a public highway, the legislation, and that they will comply with the regulations in respect there. I accept responsibility for any items borrowed from the Organiser du transponders, accessories). I understand that I am liable for the cost of borrowed may affect my entry into subsequent events. I confirm that I have not been refused an ACU Licence, nor had an ACU L 	rstand the National Sporting Code of the ACU, the ACU Standing Regulations, such Supplementary and by them. and I am competent to do so. I confirm that I understand the nature and type of event I am ding that such risks may involve negligence on the part of the organisers or officials. It is that I may enter specifically excludes liability between the participants. I understand that this principally the result of my voluntary decision to engage in a high risk activity. I between all medical services and the Clerk of the Course. ACU. I confirm that I am eligible to participate on the memachine(s) described below shall be insured as required by the Road Traffic Acts, or equivalent of. These items include but are not restricted to (safety clothing, or replacement of any items lost or not returned and non-payment or non-replacement of items
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 ir may suffer, the dominant cause of any serious injury will always be my volu	PRT: I understand that by taking part in this event I am exposed to a risk of death, becoming idedge that even in the event that negligence on the part of the ACU, any event organiser, any individual carrying out duties on their behalf were to be a contributory cause of any serious injury I ntary decision to take part in a high risk activity. Notorsport is entirely at my own risk. I agree that I am required to register on arrival
Rider's signature:	If under 18 state date of birth*:
Passenger's signature:	
* For riders and passengers under 18 years of age - I accept the a	above conditions of entry to this event and give my approval:-
Riders and Passengers under 18 years must also complete a '	Parental Agreement Form' in addition to this entry form. Parental Agreement Parent or Legal Guardian must attend signing on with them and must be
RIDER Surname:	PASSENGER Surname:
First name(s):	First name(s):
Address:	Address:
Post code	Post code
Date of birthTel:	Tel:
	Date of birth
Date of birth	Date of birth
Date of birth	Date of birth
Date of birth	Date of birth
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