

2024 MOTORCYCLE SPORT EVENT ENTRY FORM

Road Race, Drag, Sprint, Hillclimb & Supermoto Events

AUTO CYCLE UNION	Road Race, Drag, Oprint, finicining & Supermoto Events	
PINTERNAT OF #	Auto-Cycle	Union Ltd, ACU House, Wood Street, Rugby, Warwickshire CV21 2YX Tel: 01788 566400 E-mail: admin@acu.org.uk
Event: HILLCLIMB	Organis	ers: NHCA
Venue: TREGREHAN	Date of	Event:16/06/2024
Permit No:203095	Course	Lic/Cert No. (where applicable):058
This event is held under the National Sporting Code of the Auto-Cycle Union, the Standing Regulations, Supplementary Regulations and any Final Instructions issued for the meeting. 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: - 1 hereby declare that I have had the opportunity to read, and that I understand the National Sporting Code of the ACU, the ACU, that CAU Standing Regulations, such Supplementary Regulations as have or may be issued for the event, and agree to be bound by them. 1 declare that I am physically and mentally if 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 notivithstanding that such risks may involve negligence on the part of the organisers or officials. 1 confirm that I am not currently suspended from ACU permitted competition or on the ACU Stop List as a residue of incurring a Concussion injury. 1 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 in a high risk activity. 2 I consent to the collection and retention of my personal information by the ACU. 3 I consent to the collection and retention of my personal information by the ACU. 4 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 participate on the machines for which I have entered. 3 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 reg		
available for the duration of the meeting.		
RIDER Surname:		PASSENGER Surname:
First name(s):		First name(s):
Address:		Address:
Post code		Post code
Date of birthTel:		Date of birthTel:
ACU Licence / Registration No:		ACU Licence / Registration No:
Name of your ACU Affiliated Club (of which I am a member):	Name of ACU Affiliated Club (of which I am a member):	
Class Entered:	Tra	nsponder No
Contact details in case of emergency		
MACHINE		ENTRANT (if different from Rider)
Type / Class:		Company / Name:
Make:		Address:
Capacity:cc Stroke:	mm	
Riding No. preferred: (where option is	available)	Entrant's Licence No: