

2024 MOTORCYCLE SPORT EVENT ENTRY FORM

Road Race, Drag, Sprint, Hillclimb & Supermoto Events

AUTO CYCLE UNION	race, brag, oprint, rinicinib & oupermote Events
DIVERDADT OR	le Union Ltd, ACU House, Wood Street, Rugby, Warwickshire CV21 2YX Tel: 01788 566400 E-mail: admin@acu.org.uk
Event: HILLCLIMB Organisers: NHCA	
Venue: SHELSLEY WALSH Date of Event:29/06/2024	
Permit No:	se Lic/Cert No. (where applicable):078
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: In the undersigned apply to enter the event described above and in consideration thereof: 1 Interby 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. 1 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. 1 confirm that I am not currently suspended from ACU permitted competition nor on the ACU Stop List as a result 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 to a high risk activity. 1 consent to the collection and retention of my personal information by the ACU. 1 consent to the collection and retention of my personal information by the ACU. 1 consent to the collection and retention of my personal information by the ACU. 1 consent to the collection and retention of my personal information by the ACU. 1 consent to the collection and retention of my personal information by the ACU. 1 consent to the collection and retention of my personal information by the ACU. 1 consent to the collection and retention of my personal information by the ACU. 2 to the collection of the event Lake plac	
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:	ransponder 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: