

COOKSTOWN & DISTRICT MOTOCROSS CLUB
Desertmartin Motocross Track

Event _____ **Date** _____

To be held under the Motorcycle Racing Association (Ireland) Ltd, Competition Rules and Standing Regulations and Supplementary Regulations as have or maybe issued for the event.

ENTRY FORM

PLEASE PRINT CLEARLY

Permit No _____

Name _____

Riding No _____

Address _____

Grade _____

Post Code _____

Com. License No _____

Club _____

Machine(s) Make _____

Telephone No _____

Capacity _____

TRANSPONDER NO: _____

PERSONAL ACCIDENT INSURANCE:

IF YOU ARE FROM OUTSIDE IRELAND PERSONAL ACCIDENT INSURANCE MUST BE OBTAINED THROUGH YOUR FEDERATION BEFORE ENTERING OR PARTICIPATING IN AN EVENT

MOTORSPORT CAN BE DANGEROUS AND MAY INVOLVE INJURY OR DEATH.

You must read and agree to the following declaration and paragraphs below which are designed to create a legally binding relationship in return for you being allowed to enter and compete.

- 1) I confirm that the information in this entry form and the information and my acceptance of the terms of my competition licence are correct.
2. I confirm that I understand the nature of the competition I am entering and I am competent to take part.
3. I confirm that any vehicle that I use will comply with the regulations and will be safe and fit for use in the competition.
- 4 .I will satisfy myself (by sighting lap or otherwise)before taking part that the venue and track is acceptable to me with regard to its features and physical layout (unless prohibited to do so.)
5. I will not take part if I have any doubt about my ability or the safety of the venue.
6. I accept that competition in motorsport may involve the risk of injury or death and I agree to take part at my own risk.
7. Before taking part in the event I will read and be bound by and comply with any regulations and final instructions issued by the organisers, the circuit owners and the regulatory body, MRA/MCUI.
- 8 I will not participate whilst under the influence of alcohol or intoxicating drugs and that if I am taking any prescribed medication I will inform the event organiser and seek approval to participate before taking part.
9. If under the age of 18. my parent /guardian has read the above and signed the declaration and agreement below.

Signature of the competitor..... Date.....

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PARENT /GUARDIAN DECLARATION AND AGREEMENT

To allow the applicant to enter the competition you must agree to the matters set out below which are designed to create legal obligations on you. Sign below only if you agree.

- a. I _____ (print name) am the parent/legal guardian of _____
- b. I have read the entry form and declaration completed by the applicant and confirm the answers are true.
- c. I confirm that he/she is competent to take part in the event and that any vehicle which he/she will use is safe and fit for the competition.
- d. I will, before allowing him/her to take part, satisfy myself that the course and the facilities are safe and will inspect same.
- e. I also hereby AGREE that if the applicant should sustain any injury from any cause whilst taking part in the event and as a result bring a claim for compensation against you or the organisers or officials or sponsors or entrants or owners of the venue I WILL INDEMNIFY AND PAY BACK TO YOU any sum which you may be required to pay as a result of such claim.

Signature of parent/guardian _____ DATE _____

Address (if different from applicant)

ENTRY FEE £30.00 (€40.00) - Entries to be sent to Dot McClements , 12 Shamrock Park , Rosnashane, Ballymoney BT53 7JX – cheques to be made out to Cookstown & District Motocross Club