

## DECLARATION AND INDEMNITY

*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. I hereby 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.
  2. 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.
  3. I confirm that I am not currently suspended from ACU permitted competition nor on the ACU Stop List as a result of incurring a Concussion/Suspected Concussion injury.
  4. 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 above 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.
  - 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.
  - I have read and understood The Auto Cycle Union Ltd Data Protection Policy and consent to the collection and retention of my personal information by the ACU

**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.***

Riders signature: \_\_\_\_\_ If under 18 state date of birth: \_\_\_\_\_

Passengers signature: \_\_\_\_\_ If under 18 state date of birth: \_\_\_\_\_

**\*\* For riders and passengers under 18 years of age - I accept the above conditions of entry to this event and give my approval:-**

Signature of parent or person with parental responsibility: \_\_\_\_\_

**Riders and Passengers under 18 years must also complete a 'Parental Agreement Form' in addition to this entry form. Parental Agreement Forms are available from the organisers and the ACU. Their Parent or Legal Guardian must attend signing on with them and must be available for the duration of the meeting.**

Any final instructions regarding the Race meeting will be included with your confirmation of entry and posted on the club website. You must read these carefully.

	<p><b>NG ROAD RACING CLUB</b> <b>SUPPLEMENTARY REGULATIONS</b> <b>Road Race Test Day at</b> <b>Oulton Park on 27 September 2019</b> Permit Number – ACU55769 Entries Secretary. Tel : <b>(07580) 094577</b> Email : <a href="mailto:raceoffice@ngroadracing.org">raceoffice@ngroadracing.org</a></p> <p><b>NO CALLS AFTER 8PM</b></p>	<p><b>Denise Webb</b> <b>NG Road Racing</b> <b>PO Box 382</b> <b>CARTERTON</b> <b>Oxon OX18 9DF</b></p>
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### JURISDICTION.

The Meeting will be held under the National Sporting Code and the Standing Regulations of the ACU, these Supplementary Regulations and any Further Instructions issued or official announcements made.

### OFFICIALS.

#### NG Road Racing/ACU Officials of the Meeting

Clerk of the Course	Pete Davies./ Steve Bostock / Nino Pezzini
Secretary of the meeting/	Steve Bostock.
Child Protection Officer	3 Victory Close, Churchdown, Glos, GL3 1NL

### ELIGIBILITY.

Drivers must be registered members of the NG Road Racing Club and in possession of an ACU or Scottish ACU Competition Licence for Road Racing. Licences must be produced when signing on.

### LIMITATIONS.

Maximum number of riders per session will be – Solos 60 / Sidecars 40

### ENTRIES AND ENTRY FEES.

See Entry Form.

### INSURANCE.

All Drivers will be covered by Personal Accident Insurance and Competitors Third Party Insurance whilst practising and racing. The Premium for this Insurance is paid with the entry fee. One Premium covers the Meeting regardless of the number of rides. The Organisers undertake to insure each driver and passenger, indemnifying him against any third party claims arising out of the races or official practice, excluding claims by other drivers or passengers, entrant, sponsor, or mechanic. There will be no weekly benefit payment.

### SIGNING ON OFFICE.

Office opens at 08:00.

### PROGRAMME OF EVENTS.

Solos. Practice sessions of approximately 15 minutes duration will run from 09:00 to 17:00 approximately.  
Sidecars. 2 Practice sessions of approximately 20 minutes.

### COURSE CONDUCT

Riders MUST only enter and leave the race circuit at designated points. Riding of motorised paddock bikes is prohibited. Crash helmets must be worn at all times while riding. Dangerous riding or unsporting conduct will result in exclusion and / or a fine. Whilst we welcome children and families, children must be kept under strict control at all times. Under 16 year olds, unless a competitor, are not permitted in the pit lane.

### MACHINE PREPARATION

Machines must be prepared in accordance with current ACU Road Racing Regulations.



**NG Road Racing – Test Day – 27 September 2019 at Oulton Park**  
ACU Permit Number – ACU55769

**Please complete and return this form**  
**Denise Webb, P O Box 382, Carterton, Oxon, OX18 9DF**

<b>Rider Name</b>	
<b>Address</b>	
<b>Date of Birth</b>	
<b>Telephone</b>	
<b>Passenger Name</b>	
<b>Address</b>	
<b>Telephone</b>	<b>Date of Birth</b>

<b>Licence (please circle)</b>	<b>ACU Licence Number:</b>	<b>Novice / Inter Novice</b>	<b>Clubman</b>	<b>National</b>	<b>International</b>
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<b>Class of Rider (please circle)</b>	<b>Solo</b>	<b>Sidecar</b>	<b>Minor (under 18 years old)</b>
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**Parent/Guardian (if under 18 years old)**

<b>Name</b>	
<b>Telephone</b>	<b>Signature</b>

<b>Make of Motorcycle</b>	<b>Model</b>	<b>Engine Size</b>	<b>Bike Number</b>	<b>Transponder Number</b>

**\*\*\*\* REMEMBER TO SIGN DECLARATION ON THE REVERSE SIDE OF THIS FORM \*\*\*\***

<b>Please indicate if you are new to racing / and have not taken part in a race meeting</b>	<b>Please Tick</b>
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<b>Fees</b>				<b>Please Tick</b>			<b>Please Tick</b>
<b>Solos</b>	<b>Friday</b>	<b>In advance</b>	<b>£140</b>	<input type="checkbox"/>	<b>On the day</b>	<b>£150</b>	<input type="checkbox"/>
<b>Sidecars (2 sessions)</b>	<b>Friday</b>	<b>In advance</b>	<b>£50</b>	<input type="checkbox"/>	<b>On the day</b>	<b>£60</b>	<input type="checkbox"/>

**Please enter the name and telephone number of person to contact in event of accident:**

	<b>Telephone</b>	
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**Please enclose a cheque made payable to: NGRRC for the correct amount, plus a stamped addressed envelope (size A5 letter, larger than A5 large letter) OR complete credit/debit card details below.**

<b>Credit card number:</b>					
<b>Valid from:</b>		<b>Expiry date:</b>		<b>3 digit security code</b>	
<b>Card Type:</b>	<b>Visa / Mastercard (delete)</b>			<b>Issue Number (switch only)</b>	

<b>Name on card</b>		<b>House No:</b>		<b>Postcode:</b>	
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**I authorise NGRRC to debit the entry fees to my account**