

LAUNCESTON CLASSIC TRIAL - 10TH FEBRUARY 2019

MOTORCYCLE ENTRY FORM

Rider's Full Name.....

Address.....
.....

Post Code.....

E- Mail address.....
(For final instructions and results)

Phone - Day.....

Phone - Evening.....

Passengers Full Name.....

Address.....
.....

Post Code.....

Motorcycle Make & Model.....

Engine Capacity (cc)..... Class Entered.....

Reg. No..... Year..... Novice – Yes / No

Emergency contacts:

For Rider (Name & Number).....

For Passenger (Name & Number).....

Entry Fee: £20.00

Total: £_____

Cheques should be made payable to Launceston & North Cornwall Motor Club Ltd.

Please sign the indemnities and declaration (over the page)

INDEMNIFICATION & DECLARATIONS

AMCA Declaration: Motor Sport 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 completion licence are correct.
2. I confirm that I understand the nature of the completion I am entering and I am competent to take part.
3. I confirm that any vehicle I use will comply with the regulations and will be safe and fit for use in the competition.
4. Before taking part in the event I will ensure (unless prohibited) that I have inspected the venue, the track and the facilities and geographical features and that I am satisfied that it is safe for me to compete.
5. I will not take part if I have any doubt about my ability or the safety of the venue.
6. I accept that the competition in motor sport 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 general regulations, any supplemental and final instructions issued by the AMCA, the organisers and the circuit owners and the regulatory body.
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.

My age is (if under 18)

Rider's Signature Age if under 18

Passenger's signature Age if under 18
(if appropriate)

If the Rider or passenger is under 18 years of age, the Parent/guardian must read and sign the declaration.

Please complete below if rider or passenger is under 18 years.

THIS ENTRY IS MADE WITH MY CONSENT,

Name of PARENT or GUARDIAN of RIDER or PASSENGER (Delete as appropriate.)

.....

Address.....

Postcode

Signature of Parent or Guardian
.....

Please send all completed entry forms to:

W F Kelly, The Stables, Kelly House, Kelly, Lifton, Devon, PL16 0HH