

2020 Exeter Trial Entry Form

1. I wish to enter the 2020 Exeter Trial and declare that the particulars given on this form are correct in every respect.
2. Held under the General Regulations of Motorsport UK (incorporating the provisions of the International Sporting Code of the FIA) and or the National Sporting Code of the Auto Cycle Union, the Standing Regulations, Supplementary Regulations and the Final Instructions.

2.1 Motorsport UK DECLARATION

I declare that:

2.1.1 I have been given the opportunity to read the General Regulations of Motorsport UK and, if any, the Supplementary Regulations for this event and agree to be bound by them. I declare that I am physically and mentally fit to take part in the event and I am competent to do so. I acknowledge that I understand the nature and type of the competition and the potential risk inherent with motor sport and agree to accept that risk. I understand that motorsport can be dangerous and accidents causing death, injury, disability and property damage can and do happen. I understand that these risks may give rise to my suffering personal injury or other loss and I acknowledge and accept these risks.

2.1.2 To the best of my belief the driver(s) possess(es) the standard of competence necessary for an event of the type to which this entry relates and that the vehicle entered is suitable and roadworthy for the event having regard to the course and the speeds which will be reached. I declare that the use of the vehicle hereby entered will be covered by insurance as required by the law which is valid for such part of this event as shall take place on roads as defined by the law.

2.1.3 I understand that should I at the time of this event be suffering from any disability whether permanent or temporary which is likely to affect prejudicially my normal control of the vehicle, I may not take part unless I have declared such disability to Motorsport UK which has, following such declaration, issued a licence which permits me to do so. I undertake that at the time of the event to which this entry relates I shall have passed or am exempt from an ASN specified medical examination within the specified period. (H10.1.6)

2.1.4 Any application form for a Licence which was signed by a person under the age of 18 years was countersigned by that person's parent/legal guardian/guarantor, whose full names and addresses have been given.

2.1.5 If I am the Parent/Guardian/Guarantor of the driver I understand that I shall have the right to be present during any procedure being carried out under the Supplementary Regulations issued for this event and the General Regulations of Motorsport UK. As the Parent/Guardian/Guarantor I confirm that I have acquainted myself and the minor with the Motorsport UK General Regulations, agree to pay any appropriate charges and fees pursuant to those Regulations (to include any appendices thereto) and hereby agree to be bound by those Regulations and submit myself without reserve to the consequences resulting from those Regulations (and any subsequent alteration thereof). Further, I agree to pay as liquidated damages any fines imposed upon me up to the maxima set out in Part 3, Appendix 1. Note: Where the Parent/Guardian/Guarantor is not present there must be a Guardian who must produce a written and signed authorisation to so act from the Parent/Guardian/Guarantor as appropriate.

2.1.6 I hereby agree to abide by the Motorsport UK Safeguarding Policy and Guidelines and the National Sporting Code of Conduct.

2.1.7 I have read and fully understood the regulations for Control of Drugs and Alcohol as contained in the Competitors' and Officials Yearbook Regulations H39, D35.1, G15.1.4 and have also fully familiarised myself with the information on the web sites referred to (www.motorsportuk.org, www.ukad.org.uk and www.wada-ama.org) in particular the UK Anti Doping Rules which have been adopted by Motorsport UK. Further, if I am counter-signing as the parent or Guardian of a minor then in addition to the deemed consent to the testing of that minor (UK Anti-Doping Rule 5.7.2) I hereby confirm that I give such consent for the minor concerned to be so tested.

2.1.8 I understand that my personal data is being processed solely for the purposes of running this event and will be handled by the organisers in accordance with Motorsport UK data protection policy which can be found at www.motorsportuk.org/data-protection.

Indemnity: In consideration of the acceptance of this entry I agree that neither any one of or any combination of Motorsport UK and its associated clubs, the organisers, the track owners or other occupiers, the promoters and their respective officers, servants, representatives and agents (the "Parties") shall have any liability for loss or damage which may be sustained or incurred by me as a result of participation in the Event including but not limited to damage to property, economic loss, consequential loss or financial loss howsoever caused. Nothing in this clause is intended to or shall be deemed to exclude or limit liability for death or personal injury. To the fullest extent permitted by law I agree to indemnify and hold harmless each of the Parties in respect of any loss or damage whatsoever and howsoever arising from my participation in this event.

2.2 ACU ENTRY DECLARATION: I the undersigned apply to enter the event described above and in consideration thereof: -

- I 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.
- 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.
- I confirm that I am not currently suspended from ACU permitted competition or on the ACU Stop List as a result of incurring a Concussion injury.
- 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 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.
- 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 compete 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.

2.3 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/Race, Trials or Enduro.

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I am a member of theClub	MEMBERSHIP No of Club given
SURNAME, FIRST NAME AND INITIALS.*	
ADDRESS IN BLOCK LETTERS	
Post Code	
Tel No Entrant, Day:	Tel No Entrant, Evening:
Mobile Number you expect to use on the event	
ACU Affiliation No M/C Competitors Only	Class Entered:

VEHICLE MAKE	MODEL	Vehicle Registration No
CLASS <i>[as defined in 2019 Standing Supplementary Regulations]</i>	CC	YEAR

TRIAL ENTRY FEE (Motor Cycle and Car Classes) - £80 (Late entries £89)		
TEAM ENTRY FEE, PER TEAM	£22.50	
THIRD PARTY INSURANCE (REIS) For Car entrants not covered by their own insurance	£25.00	
CLUB SUPPER TICKETS @ £22 each		
2020 SUBSCRIPTION (Mandatory for M.C.C. members only) £30 [New members £35.00]		
Cheques Payable to Motor Cycling Club Ltd		TOTAL

I declare that I am medically fit to enter this long distance event and am not receiving treatment or medication that may impair my judgement.

Signature of Entrant Age if under 18

Signature of parent or guardian if entrant is under 18.....

Signature of Passenger (**M/C Competitors Only**).....Age if under 18

Signature of parent or guardian if Passenger is under 18.....

Entrants Email:.....

All Competitors

Make Size & Name of Front Tyre(s) (Please detail the tyres you intend to use)	New / Remould
Make Size & Name of Rear Tyre(s) (Please detail the tyres you intend to use)	New / Remould
Does the engine have forced induction, i.e. Supercharging or Turbocharging	Yes / No

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CAR COMPETITORS ONLY

Are the wheel diameters standard for this model?	Yes / No	Is the gearbox/rear axle casing standard?	Yes / No
Is the vehicle fitted with a limited slip differential or any other traction control device?			Yes / No
Has the position of the engine or mountings in the chassis been altered?	Yes / No	Has the body silhouette been modified?	Yes / No

All Competitors

Passenger's ACU Affiliation No. (Class D & E Passengers only)	
Name and address of Passenger 1	
Post Code	
Name and address of Passenger 2	
Post Code	

Entrant's First Name (for programme)	
Passenger's First Name (for programme)	
Entrant's Initials (for results and medal engraving)	
Passenger's Initials (for results and medal engraving)	
Home Town	

Starting Point:	Cirencester	
	Popham	
(Please tick one)	Okehampton	
	Haynes Museum (Class O & R only)	
	Crealy	

Are you willing to be a Travelling Marshal?	YES	NO
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Do you wish to run consecutively with any particular competitor(s)?	YES	NO
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If so please name (not more than two please)	

Do you wish to have a late number?	YES	NO
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TEAM ENTRY FORM - FEE £22.50 TO BE COMPLETED BY CAPTAIN ONLY, NO LATE ENTRIES.

Team Name	
Competitors Name	Vehicle

PERSON TO INFORM IN CASE OF EMERGENCY
The persons nominated must not be competing in the Trial.
These details must be completed, do not write 'as above'.

PERSON TO INFORM IN CASE OF EMERGENCY INVOLVING RIDER or DRIVER

Name	Relationship
Address	
Telephone No.	Mobile No

PERSON TO INFORM IN CASE OF EMERGENCY INVOLVING PASSENGER 1

Name	Relationship
Address	
Telephone No.	Mobile No

PERSON TO INFORM IN CASE OF EMERGENCY INVOLVING PASSENGER 2 (If Applicable)

Name	Relationship
Address	
Telephone No.	Mobile No

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Name & address of insurance company	[If not using the REIS scheme]

OR

I declare that :	
I am over 19 years of age and held a full licence for at least 6 months.	YES / NO* (Delete as applicable)
I have had no more than 1 Fault Accident in the last 3 Years.	YES / NO* (Delete as applicable)
I have had no convictions other than a Maximum of 6 Points on my licence.	YES / NO* (Delete as applicable)
I am medically fit to drive.	YES / NO* (Delete as applicable)
*Please refer to the Secretary of the Meeting	

ENTRIES OPEN ON 8th OCTOBER AND CLOSE ON 11th NOVEMBER 2019

PLEASE ENCLOSE A SMALL SAE FOR ACKNOWLEDGMENT OF ENTRY

RETURN THIS FORM AND MEMBERSHIP RENEWAL FORM COMPLETE IN EVERY DETAIL AND SIGNED, TO:

Dave Sapp, 3 Lightgate Road, South Petherton, Somerset TA13 5AJ.
dave@sappfamily.co.uk 01460 240679 (before 9pm please)

ENSURE YOU USE SUFFICIENT POSTAGE TO AVOID SURCHARGES AND DELAYS