

## 2023 MOTORCYCLE SPORT EVENT ENTRY FORM

AUTO CYCLE UNION	Road Race, Drag, Sprint, Hillclimb & Supermoto Events
BIKESPORT GB	Auto-Cycle Union Ltd, ACU House, Wood Street, Rugby, Warwickshire CV21 2YX Tel: 01788 566400 Fax: 01788 573585 E-mail: admin@acu.orq.uk
Event:TWISTY SPRINT	Organisers:NHCA
Venue:CURBOROUGH	Date of Event:28/05/2023
Permit No:200438	Course Lic/Cert No. (where applicable):045A
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: -  • 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.  • 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 nor 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 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 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	
Rider's signature:	If <b>under 18</b> state date of birth*:
Passenger's signature:	If <b>under 18</b> 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:	
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:	
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:	
Contact details in case of emergency	
MACHINE	ENTRANT (if different from Rider)

Type / Class: ..... Company / Name: ..... Make: ..... Capacity: .....cc Stroke: .....mm Entrant's Licence No: Riding No. preferred: ..... (where option is available)