

<https://crofttrials.uk>



TRIALS ENTRY FORM

Name	
Address	
Post code	
D.O.B	
Email	
Telephone	

Please place an 'x' in the applicable box below

Expert	
Clubman	
Beginners	
Twin Shock	

Machine entered	
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Payment

Please place an 'x' in the applicable box below

Adult	£16	
Youth (Under 14)	£12	

Please make bank transfer to the account below:

IMPORTANT: PLEASE QUOTE THE RIDER'S NAME AS YOUR PAYMENT REFERENCE

Name: A J Sidney

Account No: 12662263

Sort Code: 80 46 47

Signature: x

Date	
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*** I agree with all the conditions/declaration overleaf**

*** If under 18, Parent or Guardian please sign overleaf**

INDEMNITY

HELMETS TO BE WORN AS PER AMCA RULES

DECLARATION: Motor Sport can be dangerous and may involve injury or death. You must read and agree to the following declaration and paragraphs which are designed to create a legally binding relationship in return for you being allowed to enter and compete.

- I confirm that the information in this entry form and the information and my acceptance of the terms of my competition licence are correct.
- I confirm that I understand the nature of the competition I am entering and I am competent to take part.
- I confirm that any vehicle I use will comply with the regulations and will be safe and fit for use in the competition.
- 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.
- I will not take part if I have any doubt about my ability or the safety of the venue.
- I accept that the competition in motor sport may involve the risk of injury or death and agree to take part at my own risk.
- Before taking part in the event I will read and be bound by and comply with general regulations, any supplements and final instructions issued by the AMCA, the organisers and the circuit owners and the regulatory body.
- 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.
- If under the age of 18, my parent/guardian has read the above and signed the declaration below.

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 obligation on you. Sign below **only** if you agree.

I _____ (Print Name) am parent/legal guardian of _____

I have read the entry form and declarations completed by the applicant and confirm the answers are true.

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.

I will, before allowing him/her to take part, satisfy myself that the course and facilities are safe and will inspect them.

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 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 a claim.

Signature of parent/guardian: X _____

Address (if different from applicant):

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