

MOTORCYCLE OFF ROAD 2025 - EVENT ENTRY FORM PREMIER

ACU and The Auto-Cycle Union are trading names of The Auto-Cycle Union Limited registered under Company No. 00134679 Registered Office: ACU House, Wood Street, Rugby, Warwickshire CV21 2YX Tel: 01788 566400

Organisers: GTSA Racing Ltd 0271

Date of Event:13th July 2025

EVENT:...Sussex Super Charity Grasstrack Venue: Hooklands Lane, Shipley RH13 8PX

Permit No: ACU 205210 Course Lic/Cert No. (where applicable)

This event is held under the National Sporting Code of the Auto-Cycle Union, the Standing Regulations, Supplementary Regulations and any Final Instructions issued. 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 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.

| ACKNOWLEDGEMENT OF THE RISKS OF MOTORSPO | RT: I understand that by taking part in this ever | nt I am exposed to a risk of death, becoming |
|--|--|---|
| permanently disabled or suffering some other serious injury and I acknow circuit owner, the promoter, the organising club, the venue owner, or any in may suffer, the dominant cause of any serious injury will always be my volur I have read the above and acknowledge that my participation in me by "signing on" at the designated place before taking part in all pra | ledge that even in the event that negligence on the dividual carrying out duties on their behalf were to be nearly decision to take part in a high risk activity. In a high risk activity. In a high risk activity. In a high risk I agree the nearly own risk. I agree the nearly own risk. | e part of the ACU, any event organiser, any be a contributory cause of any serious injury I |
| Participant's signature: | Please tick box if you are 18 years of age and over | . 🔲 |
| Passenger's signature: | Please tick box if you are 18 years of age and over | . 📙 |
| FOR PARTICIPANTS UNDER AGE OF 18, <u>DECLARATION OF PARENT, PERSON WITH PARENTAL RESPONSIBILITY</u> : | | |
| (COMPLETE IN BLOCK CAPITALS PLEASE) I participant, hereinafter referred to as 'my child', accept that my child may pa I declare as follows: I have read and understood the "Acknowledgement of which include the risk of death or permanent disablement. My child does to participate either as a Competitor or for Practice. I accept that it is my representation of the ACU, Standing Regulations, Supplementary from the ACU, accept that photographs or video films may be taken of be taken for promotional purposes and may appear on the ACU website or in | rticipate in the aforementioned meeting. If the risks of motorsport" which appears above. I a not suffer from any physical, medical or mental disa esponsibility to ensure that my child and I have had Regulations and Final Instructions subsequently issu f my child by officials dealing with safety issues or a | ppreciate the dangers inherent in motorsport bility which would make it unsafe for him/her d the opportunity to read and understand the led and this Entry Form and that he/she will |
| Signature of Rider's Parent, Person with Parental Responsibility: | | Date: |
| Full Name & Address | | |
| Signature of Passenger's Parent, Person with Parental Responsibility: | | Date: |
| Full Name & Address | | |
| Extract from NSC A parent or legal guardian of a rider or passenger partic competitor. | ipating in a competition requiring consent is deemed | to bear mutual responsibility with that |

| ENTRY DETAILS PLEASE FILL IN WITH BLOCK CAPITAL LETTERS | | |
|---|--|--|
| RIDER: | PASSENGER: | |
| Surname: | Surname: | |
| First name(s): | First name(s): | |
| Address: | Address if different to the Participant: | |
| | | |
| Postcode: Mobile: | Postcode: Mob: | |
| Date of Birth: Club: | Date of Birth: Club: | |
| ACU Licence / Registration No: | ACU Licence/Registration No: | |
| Name and Mobile for Next of Kin: | Name and Mobile for Next of Kin: | |
| | | |
| MACHINE Class Entered: Make: Make: | cc Strokemm | |
| Riding Number preferred: (where available) Transponder Number (if | applicable): Entrant's Licence No (If applicable): | |

PLEASE RETURN ENTRY FORM TO:

Entry Fees for this event £ Plus if applicable: Transponder Clip £ Transponder Hire £

TOTAL £