

Permit No.

ACU  
50458



# TWINSHOCK CHAMPIONSHIP



Twinshock championship Round.....	Club... <b>Wye Valley Auto Club</b>
Venue... <b>The Platch, Rowlestone, Herefs...</b>	Date of Event ... <b>Sunday 16<sup>th</sup> July 2017</b>

The club will hold an Open trial for appropriate solo machines only. See [www.nationaltwinshocktrialschampionship.co.uk](http://www.nationaltwinshocktrialschampionship.co.uk). To be held under the National Sporting Code rules of the ACU, the Standing Regulations for trials, these supplementary regulations and any final instructions which may be issued up until the start of the trial. The method of marking for this trial will be TSR22B (no stop). All Observers will be entered in a prize draw involving section numbers, there will be 3 prizes £100, £50, £25

**Entry fees:** Adults: £20.00.

**Course:** The trial will be of a sporting nature and will have 2 laps of 20 sections with 2 routes.

**Events run as Open Trials.** Any member of an ACU/ SACU Affiliated club can enter the trial.

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_ Phone No: \_\_\_\_\_

Club: \_\_\_\_\_ Date of Birth if under 18: \_\_\_\_\_ Affiliated

Membership Number: \_\_\_\_\_ Machine \_\_\_\_\_ Capacity \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

**Route entered, please tick:- A - Expert \_\_\_ B - Clubman \_\_\_**

**Please tick class:- 1: Monoshock \_\_\_ 2: Historic Spanish \_\_\_ 3: Twinshock \_\_\_ 4: Pre 72s, Britshocks \_\_\_**

**Entry declaration:** I / we 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 we are 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 accept that insurance arranged on my behalf by the organisers of events that I may enter specifically excludes liability between 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 compete on shall be suitable and proper for the purpose. I confirm that I am eligible to complete 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 it / they will comply with the regulations in respect thereof.
- I agree that I am required to register our arrival by "signing on" at the designated place prior to commencement of my practice or first competition, whichever occurs first.
- 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 enclose the entry fee of: £20.00.
- Appeals should be directed to the Twinshock Championship organising committee [twinshockchampionship@gmail.com](mailto:twinshockchampionship@gmail.com) within 7 days of the trial.

**Acknowledgement of the risks of motor sport:** I/we understand that by taking part in this event I/we are exposed to a risk of death, becoming permanently disabled or suffering some other serious injury and I/we acknowledge that even in the event that negligence on the part of the ACU, 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/we may suffer, the dominant cause of any serious injury will always be my/our voluntary decision to take part in a high risk activity.

I/we have read the above and acknowledge that my/our participation in motorsport is entirely at my/our own risk.

Rider's signature: \_\_\_\_\_ If under 18 state date of birth\*: \_\_\_\_\_ DOB \_\_\_\_\_

\* For riders 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: \_\_\_\_\_

Riders under 18 years of age who cannot produce a valid ACU Competition Licence/Trials Registration must also complete a 'Parental Agreement form (single event)' in addition to this entry form.