

QRS ENTRY FORM 2012

EVENT.....quad VENUE..... PERMIT No.....

DATE OF EVENT.....

RIDER: Surname..... First Name.....

Address.....

Tel..... DOB..... SACU/ACU Licence No.....

CLASS: Please tick box below

| Standard 50cc | Modified5 0cc | 50cc 100cc Standard | 50cc- 100cc Modified | 50cc- 100cc Geared Open | 200cc/ 2 stroke 250cc 4 stroke Standard | 200cc /2 stroke 250cc /4 stroke Modified | 250cc Water cooled 4 stroke | Over 40s Class | Adult B Class Support | Adult Champ A Class |
|------------------|------------------|---------------------------|----------------------------|----------------------------------|---|--|--------------------------------------|----------------------|--------------------------------|---------------------------|
| | | | | | | | | | | |

MACHINE: MAKE..... CAPACITY.....cc RIDING No.....

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/we the undersigned apply to enter the event described above and in consideration thereof:-

.I/we hereby declare that I/we have had the opportunity to read, and that I/we 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/we confirm that I/we understand the nature and type of event we are entering and its inherent risks and agree to accept the same notwithstanding those such risks may involve negligence on the part of the organizers and officials.

Transponder Number _____

I/we enclose the correct QRS discounted member fee of £40 adult £25 youth

Non-member fee £50 adult £35 youth

Please make cheques made payable to **QUAD RACING SCOTLAND**

I am / I am not under 18 years of age (delete as applicable) If under 18yrs old state DOB.....

RIDERS SIGNATURE DATE

PARENTAL DECLARATION: I.....the parent and / or guardian of.....

(Hereinafter referred to as my/our child) accept that my/our child may participate in the aforementioned event. I/we declare as follow:-

.I/we have read the above entry declaration and here by agree with it.

.I/we are satisfied and content that my/our child be allowed to participate as a competitor and that he/she possesses the standard of competence necessary for an event of the type to which his/her entry relates to and that the machine entered will be suitable, safe and will comply with the Regulations for these events.

SIGNATURE PARENT OR GUARDIAN.....

Return to (along with correct entry fee) : Yvonne Boyd, 6 Park Avenue, Kilwinning, Ayrshire, KA13

7AD phone 01294 557821

Closing date for entry is the Monday prior to the event,