

EVENT ENTRY FORM

01.05



CLUB DETAILS

Club Name		Event Name	
Venue		Event Date	

RIDER DETAILS

First Name		Surname	
Address			
	Postcode		
E-Mail Address			
Home No		Mobile No	
Race No		Machine	
		Capacity (cc)	
NORA Licence No		Transponder	

PASSANGER / CO-DRIVER DETAILS (If Applicable)

First Name		Surname	
Address			
	Postcode		
NORA Licence No			

DECLARATION

I, the undersigned, apply to enter the event described in this entry form.

In consideration of being permitted to participate in this event I declare as follows:

That I have read the Codes of Practice and Regulations for NORA 92 Ltd, the Event Regulations and entry form (when applicable) and I agree to be bound by them in every respect. That I am fit and not suffering from any physical or mental disability which would impair my safe participation in the event. I undertake to inform NORA 92 Ltd immediately should any change in my condition occur which I have reason to or ought to have reason to believe would affect my ability to participate in this competition. That I have completed a medical questionnaire form (as requested during your licence application) and that I will inform NORA 92 Ltd should my medical status have changed. As a participant I may be exposed to the risk inherent in motor sport and that I am prepared to take such risks. I further agree that I shall not seek to claim against NORA 92 Ltd, the organisers, their officials, the landowners, the promoter or other bodies or individuals connected with the event(s) in



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respect of any damage to my property howsoever caused, and whether by negligence or breach of statutory duty of the said bodies or persons. NORA 92 does not provide personal accident insurance other than through annual licences.

PAYMENT DETAILS

Card Number				
Valid From		/		Valid Until
				/
Security No.			Issue No.	
Name On Card				Total Payment

I have enclosed the entry fee payment of £	
Cheque	
Cash	

RIDER SIGNATURE

Signature		Date	
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PARENT SIGNATURE (FOR RIDERS UNDER 18)

Signature		Date	
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