

**THIS FORM MUST BE COMPLETED BY ALL COMPETITORS
UNLESS HOLDERS OF AN MCF LICENCE**

SECTION 2 – ONE EVENT LICENCE v2

Please answer all of the following questions truthfully. A false declaration may have serious consequences. If you answer 'Yes' to any of the questions please give full details in the space provided at the end of this section. This should include the date you first developed the condition, details of any tests, investigations and of any treatment you have undergone. Please include the names and addresses of any specialists you have seen and hospitals you have attended. Please give full details of any medication you are taking.

Have you ever suffered from or are you currently suffering from any of the following illnesses or conditions:			
1) Epilepsy, fits, blackouts or any condition which may cause loss of consciousness?	Yes	No	
2) Any condition that might cause dizziness, vertigo or loss of balance?	Yes	No	
3) Have you been unconscious because of a head injury or suffered from concussion?	Yes	No	
4) Any brain disorder such as a stroke, MS or Motor Neurone disease?	Yes	No	
5) Any loss of strength, feeling, control or movement of any of your limbs, head or neck?	Yes	No	
6) Amputation of any part of your limbs with or without an artificial replacement?	Yes	No	
7) Any condition or operation involving your heart or main blood vessels or any high blood pressure?	Yes	No	
8) Any kind of tumour or cancer?	Yes	No	
9) Diabetes? If 'Yes' please state whether treated by diet, tablets or insulin?	Yes	No	
10) Any psychiatric or emotional illness or any alcohol/drug/substance misuse?	Yes	No	
11) Any condition affecting your vision or eyes, including colour blindness?	Yes	No	
12) Are you taking any medication?	Yes	No	
(Include all tablets, medicines etc. whether prescribed or bought over the counter.)			
Info:			

**MOTOR SPORTS CAN BE DANGEROUS AND MAY INVOLVE INJURY OR DEATH
Read carefully before signing to ensure you agree.**

- The answers given by me in this License application are true.
- I fully understand the type of the events which the License allows me to enter and the rules and regulations that apply to such events and to competitors and will comply with them.
- I will ensure that before I enter any event I am competent to compete and that any vehicle that I use is safe and fit for the competition and nature of the course.
- I will satisfy myself (by sighting lap or otherwise) before taking part that the venue and track is acceptable to me with regard to its features and physical layout (unless prohibited to do so).
- I will NOT enter or take part in any competition where I have a doubt as to my safety.
- I will tell you immediately if, for any reason, I believe that I am no longer able to satisfy the terms of this Licence or I become aware that I have become unable to compete due to physical or other disability.
- I agree to accept the risks of injury and death that are inherent in motor sports and agree to take part at my own risk.
- If under the age of 18, my parent / guardian has read the above and signed the declaration and agreement below.

Rider Signature Date of birth* *Without a SIGNATURE your entry will not be accepted*

In case of Emergency Contact, Name; Number;

Signature of parent or person with parental responsibility for Rider.....Print Name.....

CHEQUES MADE PAYABLE TO:- 'ALL TERRAIN EVENTS'

Please return your completed entry form, payment and SAE to;

Gaynor Nash, 'FUN', 74 Roman Way, Andover, Hants SP10 5JJ

UNLESS OTHERWISE NOTIFIED BY THE ORGANISER, THIS EVENT IS AUTHORISED BY THE MCFederation AND THEREFORE EXEMPT FROM THE ROAD TRAFFIC ACT 1988 SECTIONS 1,2 & 3 (AS AMENDED BY THE ROAD TRAFFIC ACT 1991/95) SECTION 13A