## West Glos, and Dean Forest MCC Old Hendre Farm Trail Bike Trial **Supplementary Regulations**

Saturday 9th May **ACU Permit: ACU44539** 

A closed to club trial designed for solo trail and enduro bikes and intended as a fun event. This event is held under the National Sporting Code and Standing Trials Regulations of the Auto-Cycle Union, these Supplementary Regulations and any Final Instructions that may apply. Although the venue is entirely on private land, and bikes do not have to be road-legal, no noisy or tatty field bikes will be permitted.

Classes: Trail-Bike

> Enduro Pre-65

Trials – novice class, no award

Trials - Youth

Officials: Clerk of Course **Darren Thomas** 

Secretary of Meeting Ian Vessey

C/O Haines Motorcycles

123-127 High Street, Cinderford, Glos. GL14 2TB

Club Steward

Eligibility: All riders must be West Glos. and Dean Forest MCC members – membership £5.

All riders must hold a current ACU Affiliated membership card or licence. ACU Affiliation(Trials

Registration) can be obtained by completing a form available from the ACU website

WWW.ACU.ORG.UK and returning with entry – include a photograph and the £10 fee. Please allow

2 weeks for the ACU to issue a card.

Please note: All ACU cards will be checked on the day.

**Entries:** Are limited to 50, there will be entries on the day.

£15 Adults £10 Youth Entry Fee:

Team entries: Free -3 riders per team.

Entry fees will only be returned in the event of cancellation or postponement for more than 24hrs, and a

portion of the fee may be retained for administration costs.

The organisers reserve the right to refuse entry.

Venue: Old Hendre Farm, Hendre, Near Monmouth. Ref: SO 457 126

The venue will be signed from the crossroads by the golf course at Hendre on the B4233 approx. 4

miles West of Monmouth.

Start time: 2pm

**Sections:** Standard trials marking will be used throughout -0, 1, 2, 3, 5. Trial is a no-stopping trial (TSR 22B).

**Special Test: No** 

Tyres: Rear tyres must be trials pattern (TSR11). Any type of front tyre may be used. Riders with ineligible rear tyre will not be allowed to start.

**Refreshments:** please bring some



## MOTORCYCLE OFF ROAD **EVENT ENTRY FORM** BASIC INSURANCE

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

Riding No: (Office Use)

| <u>Event</u> : Venue:  |  |
|--|--|
| Date of Event: Permit No:  | Course Lic/Cert No. (where applicable):  |
| This event is held under the National Sporting Code of the Auto-Cycle and any Final Instructions issued for the meeting. The ACU National Sporting Cod ENTRY DECLARATION: I the undersigned apply to enter the event described above and in consis issued for the event, and agree to be bound by them.  I hereby declare that I have had the opportunity to read, and that I understand the National Sporting Co issued for the event, and agree to be bound by them.  I further declare that I am physically and mentally fit to take part in the event and I am competent to do and agree to accept the same notwithstanding that such risks may involve negligence on the part of th I accept that insurance arranged on my behalf by the organisers of events that I may enter specifically e evidence that any serious injury will be principally the result of my voluntary decision to engage in a hi I consent to details of any injuries I may suffer at this event being passed between all medical services a 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 th Confirm that if any part of the event takes place on a public highway, the machine(s) described belows comply with the regulations in respect thereof. I accept responsibility for any items borrowed from the Organiser during the course of the event. These that I am liable for the cost or replacement of any items lost or not returned and non-payment or non- I confirm that I have not been refused an ACU Licence, nor had an ACU Licence suspended, nor have I b I understand and accept that as the Supplementary Regulations state the Insurance cover for this ex- respect of any claim made by third parties is limited to £10 million.  ACKNOWLEDGEMENT OF THE RISKS OF MOTORSPORT: I understand that by takin permanently disabled or suffering some other serious injury and I acknowledge that even in the event tha organising club, the venue owner, or any individual carrying out du | de and Standing Regulations are published annually in the ACU Handbook.  deration thereof: - Code of the ACU, the ACU Standing Regulations, such Supplementary Regulations as have or may be to so. I confirm that I understand the nature and type of event we are entering and its inherent risks ne organisers or officials.  Sexcludes liability between the participants. I understand that this form may be used in litigation as high risk activity.  The purpose of the Course.  The purpose of the Course of the Course of the purpose of the machines for which I have entered.  The purpose of the Course of the Course of the purpose of the machines for which I have entered.  The purpose of the Course of the Course of the purpose of the machines for which I have entered.  The purpose of the Course of the Course of the purpose of the machines for which I have entered.  The purpose of the Course of the purpose of the purpose of the machines for which I have entered.  The purpose of the Course of the purpose of the |
| be my voluntary decision to take part in a high risk activity.<br>I have read the above and acknowledge that my participation in motorsport is entirely at my own risk. I<br>taking part in any Practice Session or Race   | l agree that I am required to register on arrival by "signing on" at the designated place before   |
| Participant's signature:   | Please tick the box if you are 18 years of age or older  |
| (COMPLETE IN BLOCK CAPITALS PLEASE) I  | n appears above. I appreciate the dangers inherent in motorsport which include the risk of death or rould make it unsafe for him/her to participate either as a Competitor or for Practice. I accept that National Sporting Code of the ACU, Standing Regulations, Supplementary Regulations and Final photographs or video films may be taken of my child by officials dealing with safety issues or ac-CU website or in ACU publications.  Date:   |
| ENTRY DETAILS PLEASE FILL IN WITH BLOCK CAPITAL LETTERS  |  |
| RIDER  | MACHINE  |
| Name First Name:   | Make: Model:   |
| Surname:   | Capacity: cc Stroke: mm (where requested)  |
| Address:   | Riding No. preferred: (where option is available)  Note: If Entrant is different from Rider, please use Standard form on www.acuwesterncentre.org.uk/ gazette/organisers/standardforms.html  |
| Postcode:  | ENCLOSED         Results of Centre events will be posted/linked on www.acuwesterncentre.org.uk         I enclose SAE's for Results/Confirmation: yes $\square$ no $\square$ (Tick one)         Total fees included: £  |
| CLASS/ROUTE (refer to supplementary regulations)  Route:   | Received: Licence: Cash: Route: Cheque: Class: (Cheque No.) Bike: Confirmed:   |