West Glos. and Dean Forest MCC Cottage Farm easy Trial Supplementary Regulations

Sunday 15th May 2016 ACU Permit: ACU47347

A closed to club trial designed for solo trial 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 and conducted Youth

Officials: Clerk of Course Rod Jones

Secretary of Meeting Rod Jones

C/O Haines Motorcycles

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

Club Steward TBA

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 <u>WWW.ACU.ORG.UK</u> 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, (Online entries have licences confirmed online.)

Entries: Are limited to 50. Online entries close midnight 13th May. Postal entries close on Wednesday 11th May or when full.

Entry Fee: £15 Adults £10 Youth

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.

Entries will NOT be taken on the day repeat. Entries will NOT be taken on the day

Venue: Cottage Farm, Rockfield Near Monmouth NP25 5QD

The venue will be signed from the Junction on the Rockfield/Hendre Road approx 2 miles from Monmouth

Start time: 10:30am

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

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: Any donations gratefully received.

Routes: Easy route marked red and blue.

Hard route for experienced riders marked as a white deviation.

Conducted route for youth marked green



MOTORCYCLE OFF ROAD <u>EVENT ENTRY FORM</u> PREMIER INSURANCE ACU and The Auto-Cycle Union are trading names of The Auto-Cycle Union Limited registered under Company No. 00134679

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WESTERN	Registered Office: ACU House, Wood Street	t, Rugby, Warwickshire CV21 2YX Tel: 01788 566400	(Office Use)
Event:		Organisers:	
Venue:		Date of Event:	
		Course Lic/Cert No. (where applicable):	
This event is held under the National Sporting Code of the Auto-Cycle Union, the Standing Regulations, Supplementary Regulations and any Final Instructions issued. The ACU National Sporting Code and Standing Regulations are published annually in the ACU Handbook. Entry declaration: I 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 I am 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 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 accept that insurance arranged on my behalf by the organisers of events that I may enter specifically excludes liability between the 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 confirm that the machine(s) as described below which I shall participate on shall be suitable and proper for the purpose. I confirm that I am eligible to compete 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 they will comply with the regulations in respect thereof. I accept responsib			
circuit owner, 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 may suffer, the dominant cause of any serious injury will always be my voluntary decision to take part in a high risk activity. I have read the above and acknowledge that my participation in motorsport is entirely at my own risk. I agree that I am required to register on arrival by "signing on" at the designated place before taking part in any Practice Session/Race, Trials or Enduro.			
Rider's signature: Please tick box if you are 18 years of age and over			
FOR PARTICIPANTS UNDER AGE OF 18, DECLARATION OF PARENT, PERSON WITH PARENTAL RESPONSIBILITY:			
(COMPLETE IN BLOCK CAPITALS PLEASE) I the parent/person with parental responsibility of the above named participant, hereinafter referred to as 'my child', accept that my child may participate in the aforementioned meeting. I declare as follows: - I have read and understood the "Acknowledgement of the risks of motorsport" which appears above. I appreciate the dangers inherent in motorsport which include the risk of death or permanent disablement. The child does not suffer from any physical, medical or mental disability which would make it unsafe for him/her to participate either as a Competitor or for Practice. I accept that it is my responsibility to ensure that the child and I have had the opportunity to read and understand the National Sporting Code of the ACU, Standing Regulations, Supplementary Regulations and Final Instructions subsequently issued and this Entry Form and that he/she will comply with them. I accept that photographs or video films may be taken of my child by officials dealing with safety issues or accident investigations. Photographs may also be taken for promotional purposes and may appear on the ACU website or in ACU publications. Signature of Rider's parent or person with parental responsibility:			
RIDER		MACHINE	
First Name:	Surname:	Make: Model:	
Address:		Capacity: cc Stroke: mm (where	requested)
		Riding No. preferred: (where option is available)	ole)
Postcode:	Date of Birth:		
Tel/s:		ENCLOSED	
ACU Licence/Registration No:		Results of West Glos events will be posted on www.wgdfmcc.org.uk	
Name of ACU Affiliated Club		l enclose SAE's for Results/Confirmation: yes no	(Tick one)
(of which I am a member):		Total fees included: £	liconco
email:		to cover (identify): entry membership Please make cheques payable to 'West Glos & Dean Forest MCC'	licence.
	plementary regulations)	Cash £: Confirmed: C	oute: Class: Bike:
G. admig/ Class		Office Use	

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Form C8PM - 2016 (West Glos Solo Open Trial)