

TRACK DAY REGISTRATION FORM

OFFICE USE ONLY					
DATE:		CIRCUIT OPERATOR:		NO LIMITS WRISTBAND N°:	
CIRCUIT:		LICENCE CHECKED BY:		WRISTBAND N°: (IF APPLICABLE)	
FIRST NAME:			SURNAME:		
DATE OF BIRTH:			TEL N° (DAY):		
HOME ADDRESS:				POSTCODE:	
				EMAIL ADDRESS:	
PERSON TO CONTACT IN CASE OF EMERGENCY:				RELATIONSHIP:	
ADDRESS OF EMERGENCY CONTACT:				TEL N° (DAY):	
HAVE YOU BEEN ON TRACK WITH NO LIMITS IN THE LAST 2 YEARS: (CIRCLE THE CORRECT ANSWER)	YES	NO	IF YES, HAS YOUR ADDRESS / EMAIL CHANGED IN THE LAST 2 YEARS: (CIRCLE CORRECT ANSWER)	YES	NO
PLEASE DESCRIBE YOUR LEVEL OF CIRCUIT RIDING COMPETENCE (IN YOUR OWN OPINION) (CIRCLE THE CORRECT ANSWER)	EXPERT / RACER	EXPERIENCED / FAST	INTERMEDIATE	NOVICE	
DO YOU WISH TO BE KEPT UPDATED WITH OFFERS OR EVENT INFORMATION FROM NO LIMITS? (PLEASE TICK IF "YES")					

RIDING ON ANY RACING CIRCUIT CAN BE DANGEROUS AND MAY INVOLVE INJURY OR EVEN DEATH
YOU MUST READ AND SIGN THE FOLLOWING DECLARATION AS A CONDITION OF YOUR PARTICIPATION IN THIS EVENT

IN SIGNING THIS REGISTRATION FORM I CONFIRM EACH AND EVERY ONE OF THE FOLLOWING:

- I am familiar with the nature of the motorsport activity which I am registering to undertake and acknowledge all of the risks which are inherent in undertaking such activity;
- I am sufficiently competent to ride and otherwise operate the motorcycle(s) which I will be riding at the event and that such competence is appropriate my level of circuit riding competence which I have represented in the table above;
- I will satisfy myself (by sighting lap or otherwise where permitted) before taking part that circuit is acceptable to me with regards to its features and physical layout;
- I acknowledge that other participants with varying levels of rider skill will be on the circuit at the same time as me and that some of those riders may be undergoing track/rider training;
- I acknowledge that No Limits are not a training organisation and that it provides experienced track riders only to assist you in determining the layout of the circuit and not in any way to provide rider instruction other than for the purposes of maintaining the safety of all riders on circuit;
- I am in good health and my eyesight is up to the standard required to be eligible for a full motorcycle road licence or ACU road race licence;
- I am not suffering from any medical condition or disability which is likely to adversely affect my competent control of a motor vehicle of the type being used in undertaking such activity or which might otherwise make it unsafe (for me and/or for any other participant) to undertake such activity;
- I acknowledge and accept that at all times I am solely responsible for any decision as to my fitness to undertake such activity and as to whether to continue and/or to discontinue to ride a motorcycle in my possession in undertaking such activity;
- I will not consume or otherwise be under the influence of alcohol or any drugs (including any prescribed drugs which may affect my ability to safely control a motorcycle) at any time whilst participating in the event and/or riding at the venue (whether on circuit, in or around the paddock area, and/or pit areas (including pit lane));
- I acknowledge that neither No Limits or the Circuit Operator will inspect or scrutineer my motorcycle(s) or safety clothing and that I am therefore solely responsible for the good and safe working condition of my safety clothing and any motorcycle(s) which I ride at the event (whether on circuit, in or around the paddock area, and/or pit

- areas (including pit lane) and confirm that such motorcycle(s) is and shall at all times during any such activity be maintained in a good and safe working condition and as a minimum to such standard as to be reasonably expected of a prudent user of such motorcycle(s) to participate in such activity. Irrespective of the foregoing, any onbike camera equipment or other permitted equipment (NOT including any timing equipment) will be safely and securely attached to my motorcycle(s) using fit and proper mounting equipment (and not mounted on top of the petrol tank or on my person);
- In accepting and wearing the relevant wrist band and/or other label provided to me by No Limits and/or the Circuit Operator which displays that I have attended the relevant safety briefing for the above event:
 - I have attended the briefing for its full duration;
 - I have listened to the full content of the briefing;
 - I have fully understood the content of the briefing; and,
 - I shall at all times abide by the content of such briefing without any exception.
 - Without prejudice to any of the above, I acknowledge and accept that No Limits and/or the Circuit Operator personnel reserve the right without notice to remove me from the circuit (including all property at which the circuit is located) in the event of any breach (including any reasonably suspected breach) of the confirmations given above and/or in the event that No Limits and/or the Circuit Operator personnel reasonably consider my actions (including any of those persons for whom I am responsible) at any time whilst undertaking such activity to pose any unreasonable risk and/or danger to any other person present at the circuit (including all property at which the circuit is located) and whether or not such persons are participating in the motorsport activity referred to on this Registration Form.
 - I will not make any claim against No Limits and/or the Circuit Operator (including any officers, directors, or other personnel engaged by either of them) in respect of any injury or other damage sustained by me and/or to any vehicle brought onto the venue premises by me (or on my behalf) during the event PROVIDED THAT nothing shall be deemed to be any attempt by No Limits and/or the Circuit Operator to limit or exclude any liability which it (respectively) may have in respect of any personal injury or death which is caused as a result of the negligence of No Limits or the Circuit Operator (respectively).

SIGNED:	DATE:
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To be completed if Rider is under 18 years of age:

I being the lawful parent/guardian of the above named and having read and understood the terms of this registration hereby sign this Registration Form by way of approval and undertake acceptance of the above on behalf of the above named.

SIGNATURE OF PARENT / GUARDIAN:	DATE:
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