



INDEMNITY FORM

NAME **EMERGENCY NAME & CONTACT NO:**

ADDRESS:

..... **TELEPHONE NUMBER:**

CLASS **RACE NO.**

I, the undersigned, hereby declare that I have read and agree to abide by the conditions hereunder.

SIGNATURE: **DATE:**

In consideration of Super One Series Limited Registered in England with company number 03937840 having its registered office at Manley House Farm Manley Lane Manley WA60PF ('Super One Series') granting me the facility to race under their IKR meeting, I agree to save harmless and keep their officers, employees and Series officials and landowners, the drivers of other vehicles, their representatives, agents from and against all actions, claims, costs, expenses and demands in respect of death, injury, loss or damage to the property or myself howsoever caused, arising out of or in connection with my driving or attending this event, notwithstanding that the same may have been contributed to or occasioned by the negligence of the said representative or agent. I confirm that I have seen a copy of and have read and agree to abide by the Series Regulations and circuit safety regulations as issued by the Super One Series and as such, agree to their regulations.

I confirm that my equipment is to a safe standard and I have the relevant safety equipment for racing. I accept that I shall be solely responsible for any decision as to my fitness to drive and the track worthy condition of any vehicle and whether to drive or discontinue to drive the vehicle at any time whilst it is in my possession or under my control I will satisfy myself before taking part that the venue and track is acceptable to me with regard to its features and physical layout I will not take part if I have any doubt of my ability or the safety of the equipment or venue. I will not participate whilst under the influence of alcohol or intoxicating drugs and, if I am taking any prescribed medication, I will inform the event organisers before arriving at the circuit and seek approval before taking part.

I hereby declare that I am in good health, that my eyesight is up to the standard required for a road driving test and that I am not suffering from epilepsy or haemophilia or any other illness or disability that may make it unsafe for me to drive or continue to drive or ride as a passenger

I accept that the Super One Series are unable to offer on-site medical facilities, with the exception of basic first aid, and I have made the decision to drive (or ride as a passenger) in full knowledge and appreciation of this fact I further accept that the indemnity which I have given above includes any situation arising out of or in connection with the lack of such facilities

MOTORSPORT CAN BE DANGEROUS AND MAY INVOLVE INJURY OR DEATH

FOR PARTICIPANTS UNDER THE AGE OF 18 YRS - As parent/legal guardian of the above named, I hereby accept the conditions above and confirm that my child is competent to take part and will comply with the Series Regulations I will, before allowing him/her to take part, satisfy myself that the course, vehicles and facilities are safe and will inspect same I also hereby agree that if the child should sustain injury from any cause whilst taking part in the event and, as a result, bring a claim for compensation against you or the organisers or officials or entrants or owners of the venue I will indemnify and pay back to you to the maximum extent permitted by law any sum which you may be required to pay as a result of such claim.

NAME..... Parent/Guardian SIGNATURE Date