

Affix Drivers
Photograph

SKEGNESS RACEWAY Ltd

I.M.IDENTIFICATION FORM

Skegness Raceway Ltd. Marsh Lane, Orby, Skegness Lincs PE24 5JA

www.skegness-stadium.info email: drivers@skegway.info

Tel 07881 021058 Booking line Text ONLY 07798 868947

DRIVERS RACING CONTRACT 2018

THIS AGREEMENT is made between Skegness Raceway Ltd. and

NAME.....

Drivers Date of Birth..... **Age last birthday**.....

Address (Block capitals).....

.....

.....**Post code**.....

Contact numbers

Home..... .mobile.....

Email.....

I wish to apply to Skegness Raceway Ltd to race

a.....(state formula) Race number

I agree as follows.

(1). I have been provided with a copy of and read this agreement and the Skegness Raceway Ltd. Rules & Regulations and understand them and agree to abide by the Rules and conditions set out below. I agree to abide by the rules as laid down by Skegness Raceway and its Board of Control.

(2). I am over 16 but not over 70 years of age (if you are over 16 but under 18 years of age you will need a Parent or Guardian to sign this application see page4). If you are over 64 and under 70 you will need to provide a Full Drivers licence and a Medical Certificate.

(3). I fully understand the nature and type of racing in which I wish to participate and I am also fully familiar with the nature, layout , features and geography of the Circuit upon I wish to race.

(4). I am satisfied that the Circuit is safe for me to race on and that should I at any time have any doubt as to the safety I am entitled to decline to race.

(1).

(5). I hereby give Skegness Raceway Ltd the right to use my name and my racing number for the purpose of advertising or publicity as they see fit. Not to take part, as a person or allow my competition car, my name or racing number to be used with any other promotion advertising, at any time within the dates of this agreement

(6). I will pay Skegness Raceway Ltd. on the signing of this agreement the sum as listed below. Skegness Raceway Ltd. will on acceptance of this agreement supply me with a Driving (Racing) Log Book and Number (exclusive to myself for the period of this agreement, one Rule Book for 2018 and notification of my racing grade and the opportunity to race according to the Rules set out in the 2018 Rule Book. I understand that it is my responsibility to ensure that I receive a copy of the 2018 rules and regulations.

(7). Not to cause, or be part of or in any way be involved with any action which would or could disrupt a race meeting. I also understand that I am responsible for the actions of my pit crew and family members, and acknowledge that if their behavior in any way disrupts a race meeting, my licence may be suspended or in some circumstances be cancelled.

(8). I understand that any injury sustained by me during racing at Skegness Raceway Ltd. will only entitle me to personal accident cover.

The company reserves absolute right to take whatever action or disqualifications deemed to be necessary. Skegness Raceway Ltd reserves the right to refuse this application without giving their reasons or to terminate the license to race at any time.

MEDICAL QUESTIONNAIRE - MUST BE COMPLETED

I hereby warrant the following answers are true and each warranty is repeated and continues to be true throughout the term of this agreement in respect of my medical condition in respect of my medical condition.

Please answer Yes or No.

1. Do you suffer epilepsy or sudden attacks of disabling giddiness or fainting?.....
2. Are you suffering from any defect in movement or muscular power?.....
3. Are you suffering from any disease, medical condition, mental or physical, or disability which may cause the driving by you in a competition car to be a source of danger to yourself or others on the track or on the Stadium property?
.....
4. Do you suffer from any back or neck problems which have caused you to visit a Doctor in the last 12 months?.....
5. Have you suffered any race injuries which have resulted in you receiving hospital treatment in the last 5 years? If so please give full details on a separate sheet.

If the answer is YES to any of the above medical questions. A DOCTORS LETTER WILL BE REQUIRED prior to a racing license being issued.

DRIVERS CONTRACT NOTES

PLEASE READ THESE NOTES VERY CAREFULLY BEFORE COMPLETING YOUR CONTRACT

- (a) Please fill in with full name & address & contact phone numbers.
- (b). Please supply **2 color photographs** of yourself with this agreement.
PLEASE NOTE LICENCE WILL NOT BE ISSUED WITHOUT PHOTOS
- (c). If you wish to compete in an additional formula, a fee of £30 is required.

FORMULA(S) TO BE RACED ACCORDING TO THIS APPLICATION;

(1).....**Racing Number Requested**.....

(2).....**Racing Number Requested**.....

DISCLOSURE OF PREVIOUS OR CURRENT RACING SUSPENSION OR BAN

Please answer Yes or No

Are you currently under a suspension or ban from racing

Have you been suspended or banned from racing by Skegness Raceway Ltd. or any other promotion in or outside the control of the ORCi.....

If the answer is YES to either of the above please give details.....

.....

PREVIOUS RACING HISTORY

Previous racing number Formula raced.....

YearPrevious Promotion.....Last grade achieved.....

Sponsors Names.....

.....

I declare to the best of my knowledge & belief that the above answers are true.

Signed by applying driver.....Date.....

To be completed by Parent /Guardian of applicants 16yrs & above and under 18yrs of age.

Signed..... Date.....

Name.....Parent/Guardian.....

Address.....

.....Postcode.....

Please tick formula applied for,		Fee
BANGERS	(£60 before Dec 31 st 2017)	£75
1300 SALOON STOX	(£60 before Dec 31 st 2017)	£75
GT HOT RODS	(£55 before Dec 31 st 2017)	£65
ROOKIE BANGERS	(£45 before Dec 31 st 2017)	£55
M D Hot Rods	(£50 before Dec 31 st 2017)	£65
LADY ROOKIE BANGERS	(£35 before Dec 31 st Dec 2017)	£45

Cost of additional Log Book is £30 per formula

GT Hot Rods & MD Hot Rods £15 racing fee.

Please add £1-00 to total amount for a card payment.
Please debit my Credit/Debit Card, MasterCard/Visa/ Visa Debit

Card No.....

.Expiry Date.....Security code.....

Cardholders signature.....Date.....

Or online on www.skegness-stadium.info

Make cheques payable to Skegness Raceway Ltd and all forms along with **two photographs** should be posted to:
Skegness Stadium, Marsh Lane, Orby, Skegness, Lincs, PE24 5JA

For official use only; Date received..... Total amount..... Issued.....