



## 2010 MCF Licence Application Form

Complete this form in **BLOCK CAPITALS** to apply for an MCF Licence. If you require assistance filling in this form, please contact the MCF Office on: 01865 343666

**A PASSPORT SIZED PHOTOGRAPH IS REQUIRED FOR ALL APPLICATIONS AND FOR YOUTH RIDERS A COPY OF YOUR BIRTH CERTIFICATE IS ALSO REQUIRED.**

### Section 1 - YOUR DETAILS

First Name ..... Surname .....

Address .....

.....

County ..... Postcode .....

Date of Birth ..... Nationality .....

Email address .....

Mobile Phone Number..... Evening Phone Number .....

Make of Machine..... Engine Capacity .....

Model..... Year .....

Please Delete as Appropriate: 2 Stroke / 4 Stroke      Transponder YES  NO  (If you have your own)

Do you currently hold a recognised Motocross Competition Licence? YES  NO

If you answered 'Yes', please state the type of licence held .....

How many years racing experience do you have? .....

### MC FEDERATION

The Dovecote, Little Baldon Farm, Little Baldon, Oxford, OX44 9PU  
T: 01865 343666 & F: 01865 340014

## Section 2 - MEDICAL INFORMATION

- Please answer all the questions truthfully.
- A false declaration may have serious consequences.
- If you answer 'Yes' to any of the questions please give full details in the space provided at the end of this section. This should include the date you first developed the condition, details of any tests, investigations and of any treatment you have undergone.
- Please include the names and addresses of any specialists you have seen and hospitals you have attended.
- Please give full details of any medication you are taking.

### Have you ever suffered from or are you currently suffering from any of the following illnesses or conditions:

- 1) Epilepsy, fits, blackouts or any condition which may cause loss of consciousness? YES  NO
- 2) Any condition that might cause dizziness, vertigo or loss of balance? YES  NO
- 3) Have you been unconscious because of a head injury or suffered from concussion? YES  NO
- 4) Any brain disorder such as a stroke, MS or Motor Neurone disease? YES  NO
- 5) Any loss of strength, feeling, control or movement of any of your limbs, head or neck? YES  NO
- 6) Amputation of any part of your limbs with or without an artificial replacement? YES  NO
- 7) Any condition or operation involving your heart or main blood vessels or any high blood pressure? YES  NO
- 8) Any kind of tumour or cancer? YES  NO
- 9) Diabetes? If 'Yes' please state whether treated by diet, tablets or insulin?  
(please continue information on the space provided below) YES  NO
- 10) Any psychiatric or emotional illness or any alcohol/drug/substance misuse? YES  NO
- 11) Any condition affecting your vision or eyes, including colour blindness? YES  NO
- 12) Are you taking any medication?  
(Include all tablets, medicines etc. whether prescribed or bought over the counter.) YES  NO

Please use this space to give further details if you have answered 'Yes' to any of the above questions:



### Section 3 - CLASS/LICENCE REQUIRED & COST

Please tick box for the relevant Licence required

- |   |  |
|---|--|
| <input type="checkbox"/> Auto - 6 to 8 Years of Age - £25.00  | <input type="checkbox"/> Rookies* - 14 to 18 Years of Age - £25.00 |
| <input type="checkbox"/> 65cc - 7 to 10 Years of Age - £25.00 | <input type="checkbox"/> Adult Junior** - £30.00                   |
| <input type="checkbox"/> SW - 9 - 12 Years of Age - £25.00    | <input type="checkbox"/> Adult Expert** - £30.00                   |
| <input type="checkbox"/> BW - 11 - 15 Years of Age - £25.00   |  |

\* Youth Rookies; Please state Adult Expert or Junior status for your Adult Licence if required.

\*\* For MCF Youth MX Club Open Class Riders.

Are you a member of an MCF Club? YES  NO

If Yes, please state which MCF Club/s .....

### Section 4 - PAYMENT

There are a number of ways of paying for your Licence:

- You can pay by Cheque or Credit/Debit Card. **PLEASE MAKE CHEQUES PAYABLE TO: MC Federation Ltd**
- **LICENCE APPLICATIONS CAN NOT BE ACCEPTED WITHOUT FULL PAYMENT ENCLOSED**

#### Credit/Debit Card Details

Please fill out the following details if you are paying by credit card

16 Digit Card Number

Valid From Date  -  Until End Date  -

Full name as it appears on card

Security number (last 3 digits on the reverse of your card)

Switch  Mastercard  Visa  Amex  Please tick as appropriate Other  please state

I hereby give permission to deduct the following amount from my card £  (Please add £3.00 for Credit Card fees)

Card Holders Signature  Date

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**MOTOR SPORTS CAN BE DANGEROUS  
AND MAY INVOLVE INJURY OR DEATH**  
**Read carefully before signing to ensure you agree.**

- 1. The answers given by me in this Licence application are true.
- 2. I fully understand the type of the events which the Licence allows me to enter and the rules and regulations that apply to such events and to competitors and will comply with them.
- 3. I will ensure that before I enter any event I am competent to compete and that any vehicle that I use is safe and fit for the competition and nature of the course.
- 4. I will satisfy myself (by sighting lap or otherwise) before taking part that the venue and track is acceptable to me with regard to its features and physical layout (unless prohibited to do so).
- 5. I will NOT enter or take part in any competition where I have a doubt as to my safety.
- 6. I will tell you immediately if, for any reason, I believe that I am no longer able to satisfy the terms of this Licence or I become aware that I have become unable to compete due to physical or other disability.
- 7. I agree to accept the risks of injury and death that are inherent in motor sports and agree to take part at my own risk.
- 8. If under the age of 18, my parent/guardian has read the above and signed the declaration and agreement below.

Signed by Rider ..... Date .....

Print name of Rider (Block Capitals).....

**PARENT/GUARDIAN DECLARATION AND AGREEMENT (if under 18)**

You must read the answers given by the applicant and agree to the terms below which create obligations on you before a licence can be issued.

- a) I (print name).....am the Parent/Legal guardian of  
(competitor's name).....
- b) I have read the application for a competition Licence completed by him/her, and confirm the truth of his/her answers.
- c) I confirm that he/she is competent to compete in motor sport events permitted by the Licence applied for and that both he/she and I are aware of the dangers.
- d) I will ensure that he/she complies with the declaration signed by him/her and will satisfy myself as to the safety of his/her machine and the safety of the venue before allowing him/her to take part.
- e) I also hereby AGREE that in consideration of you granting a Licence that if the applicant should sustain any injury from any cause whilst taking part in a competition and as a result bring a claim for compensation against you or the organisers or officials or sponsors or entrants or owners of the venue I WILL INDEMNIFY AND PAY BACK TO YOU any sum which you may be required to pay as a result of such claim.

Signed by Parent/Guardian ..... Date .....

Print name of Parent/Guardian (Block Capitals).....

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