

## BATH CLASSIC M.C.C.

In Aid of Dorothy House Hospice, present a Classic Scramble on Sunday 26th April 2015  
with Round one of the "British Classic Championship"  
at Church Farm, Yatton Keynell, Chippenham, Wiltshire  
Map ref ST 862 760 Post Code SN14 7EL

### ENTRIES SECRETARY

Mr John Payton

84 Hillside View. Peasedown St John. Bath. Somerset BA2 8ET  
Tel: 01761 431506.  
Mob 07891 790140

### CLERK OF THE COURSE

Mike Tolman

### MACHINE ELEGIBILITY

9:00 – 10:00 AM

All machines must be fitted with an effective silencer. NOISE METERS MAY BE PRESENT.

Helmets will be examined

**A.M.C.A licences must be shown.**

### PRACTICE

10:30 AM

### FIRST RACE

11:30 AM PROMPT

### ENTRY FEES

AMCA Riders £30 plus £2 per extra bike.

A SAE must be included with your entry!

Day licence £10

**CLOSING DATE SATURDAY 18<sup>th</sup> April, late entries £20.**

### Classes

Class 1 Twin Shock

Class 2 The Pat French Memorial Trophy  
OVER 55s on any bike prior 1968

Class 3 pre 74

Class 4 pre 65 Pre Unit and Metisse

Class 5 pre 68 unlimited

Class 6 pre 68 up to 350

Class 7 pre 60

Three blocks of racing for each class.

"The Pat French Memorial Trophy" will be awarded to the fastest over 55 at the end of the meeting.

Classes will close when full.

All machines to comply with the relevant AMCA rules and regs. See the AMCA web site where a Classic rule book is available to read and download.

Name:

Tel. No:

Address:

Age:

Email Address:

Machine 1

c.c.

Year.

Machine 2

c.c.

Year

AMCA Reg. No.

Riding No.

AMCA Classic Club

Day License Y/N?

Classes Entered, British Championship by invitation of the Coordinator, Dave Gittens

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**Declaration:** Motor sport can be dangerous and may involve injury or death. You must read and agree to following declaration and paragraphs below which are designed to create a legally binding relationship in return for you being allowed to enter and compete.

1. I confirm that the information in this entry form and my acceptance of the terms of my competition license are correct.
2. I confirm that I understand the nature of the competition I am entering and I am competent to take part.
3. I confirm that any vehicle I use will comply with the regulations and will be safe and fit for use in the competition.
4. Before taking part in the event I will ensure (Unless prohibited) that I have inspected the venue, the track and the facilities and geographical features and that I am satisfied that it is safe for me to compete.
5. I will not take part if I have any doubt about my ability or the safety of the venue.
6. I accept that the competition in motor sport may involve risk of injury or death and agree to take part at my own risk.
7. Before taking part in the event I will read and be bound by and comply with general regulations, any supplement and final instructions issued by the AMCA, the organizers and the circuit owners and the regulatory body.
8. I will not participate whilst under the influence of alcohol or intoxicating drugs and that if I am taking any prescribed medication I will inform the event organiser and seek approval to participate before taking part.
9. If under the age of 18, my parent / guardian has read the above and signed the declaration below.

Parent / Guardian Declaration and Agreement to allow the Applicant to enter the competition you must agree to the matters set out below which are designed to create legal obligation on you. Sign below only if you agree.

I.....(print Name) am the Parent / legal Guardian of.....

- a) I have read the entry form and declarations completed by the Applicant and confirm the answers are true.
- b) I confirm that he/she is competent to take part in the event and that any vehicle which he/she will use is safe and fit for the competition.
- c) I will, before allowing him/her to take part, satisfy myself that the course and facilities are safe and will inspect them myself.
- d) I also hereby AGREE that if the Applicant should sustain any injury from any from any cause whilst taking part in the event and as a result bring claim for compensation against you or the organizers, officials, sponsors, 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.

**Signature of Parent/**

**Guardian**.....Date.....

Address (if different from applicant).....

**Entrants**

**Signature**.....Date.....