



# 2025 MOTORCYCLE SPORT EVENT ENTRY FORM

## Road Race, Drag, Sprint, Hillclimb & Supermoto Events

Auto-Cycle Union Ltd, ACU House, Wood Street, Rugby, Warwickshire CV21 2YX  
Tel: 01788 566400 E-mail: admin@acu.org.uk

Event: ...ACU Motor Cycle Test Day.....

Organisers: .....NG Road Racing Club.....

Venue: Cadwell Park .....

Date of Event: .....11.../ 04 / ...2025.....

Permit No: ACU..204935.....

Course Lic/Cert No. (where applicable): .....PCL 012.....

*This event is held under the National Sporting Code of the Auto-Cycle Union, the Standing Regulations, Supplementary Regulations and any Final Instructions issued for the meeting. The ACU National Sporting Code and Standing Regulations are published annually in the ACU Handbook.*

**ENTRY DECLARATION:**

I the undersigned apply to enter the event described above and in consideration thereof: -

- I hereby declare that I have had the opportunity to read, and that I understand the National Sporting Code of the ACU, the ACU Standing Regulations, such Supplementary Regulations as have or may be issued for the event, and agree to be bound by them.
- I declare that I am physically and mentally fit to take part in the event and I am competent to do so. I confirm that I understand the nature and type of event I am entering and its inherent risks and agree to accept the same notwithstanding that such risks may involve negligence on the part of the organisers or officials.
- I confirm that I am not currently suspended from ACU permitted competition nor on the ACU Stop List as a result of incurring a Concussion injury.
- I accept that insurance arranged on my behalf by the organisers of events that I may enter specifically excludes liability between the participants. I understand that this form may be used in litigation as evidence that any serious injury will be principally the result of my voluntary decision to engage in a high risk activity.
- I consent to details of any injuries I may suffer at this event being passed between all medical services and the Clerk of the Course.
- I consent to the collection and retention of my personal information by the ACU.
- I confirm that the machine(s) as described below which I shall participate on shall be suitable and proper for the purpose. I confirm that I am eligible to participate on the machines for which I have entered.
- I confirm that if any part of the event takes place on a public highway, the machine(s) described below shall be insured as required by the Road Traffic Acts, or equivalent legislation, and that they will comply with the regulations in respect thereof.
- I accept responsibility for any items borrowed from the Organiser during the course of the event. These items include but are not restricted to (safety clothing, transponders, accessories). I understand that I am liable for the cost or replacement of any items lost or not returned and non-payment or non-replacement of items borrowed may affect my entry into subsequent events.
- I confirm that I have not been refused an ACU Licence, nor had an ACU Licence suspended, nor have I been excluded from any ACU competition.
- I have read and understood **The Auto Cycle Union Ltd Data Protection Policy** and consent to the collection and retention of my personal information by the ACU.

**ACKNOWLEDGEMENT OF THE RISKS OF MOTORSPORT:**

I understand that by taking part in this event I am exposed to a risk of death, becoming permanently disabled or suffering some other serious injury and I acknowledge that even in the event that negligence on the part of the ACU, any event organiser, any circuit owner, the promoter, the organising club, the venue owner, or any individual carrying out duties on their behalf were to be a contributory cause of any serious injury I may suffer, the dominant cause of any serious injury will always be my voluntary decision to take part in a high risk activity.

**I have read the above and acknowledge that my participation in motorsport is entirely at my own risk. I agree that I am required to register on arrival by "signing on" at the designated place before taking part in any Practice Session or Race.**

Rider's signature: ..... If **under 18** state date of birth\*: .....

Passenger's signature: .....NA..... If **under 18** state date of birth\*: .....

\* For riders and passengers **under 18 years of age** - I accept the above conditions of entry to this event and give my approval:-

Signature of parent/guardian or person with other parental responsibility:.....

**Riders and Passengers under 18 years must also complete a 'Parental Agreement Form' in addition to this entry form. Parental Agreement Forms are available from the organisers and the ACU. Their Parent or Legal Guardian must attend signing on with them and must be available for the duration of the meeting.**

**RIDER** Surname: .....

**PASSENGER** Surname: .....NA.....

First name(s): .....

First name(s): .....NA.....

Address: .....

Address: .....

.....Post code .....

.....Post code .....

Date of birth .....Tel: .....

Date of birth.....Tel: .....

ACU Licence / Registration No: .....

ACU Licence / Registration No: .....

Name of your ACU Affiliated Club (of which I am a member): .....

Name of ACU Affiliated Club (of which I am a member): .....

Class Entered: ..... Transponder No.....

**Contact name and details for next of kin and in case of emergency:**

**MACHINE**

Type / Class: .....

Make: .....

Capacity: .....cc Stroke: .....mm

Riding No. preferred: ..... (where option is available)

**ENTRANT (if different from Rider)**

Company / Name: .....

Address: .....

.....

Entrant's Licence No: .....

Licensed Entrant's signature (if different from Rider): ..... Date: .....

## EVENT FORMAT

Full day of test sessions between 09:00 and 16:00. 4 groups of 55 riders.

ACU Basic Rider Assessments 16:00 to 17:00

ACU Ultra Lightweight Competitors shall have 2 sessions during the afternoon only around 16:00 and 16:50.

## TEST DAY ENTRY FEE

General Testing full day: £175.00

ACU Ultra Lightweight 2 sessions PM only: £35.00

Entry bookings can be made on-line for this event at [www.ngroadracing.co.uk](http://www.ngroadracing.co.uk)

Alternatively use this form, completed in-full and email to [Raceadmin@ngroadracing.co.uk](mailto:Raceadmin@ngroadracing.co.uk) or post to: Race Administration, 3 Victory Close, Churchdown, Gloucester. GL3 1NL

TEST DAY PAYMENT – By Card: Please call Race Administration

TEST DAY PAYMENT – On Line as below:

Bank - Lloyds Bank

Account – North Gloucestershire Motor Cycle Club Ltd

Sort – 30 91 87

Account – 02917995

Reference CPT(your surname) \*

\*It is essential you add your surname i.e. Smith after CPT

By submitting this form, you consent to the collection and processing of your personal data for the purpose of entry to this NG Road Racing event.

For more details about how your personal data is processed and your rights under GDPR, please see our Privacy Policy at [www.ngroadracing.co.uk](http://www.ngroadracing.co.uk) You have the right to withdraw your consent at any time.

## Cadwell Park



Championship Coordination –  
[Stevejbostock@gmail.com](mailto:Stevejbostock@gmail.com) 07967 681639

Race and Entries Administration  
[Raceadmin@ngroadracing.co.uk](mailto:Raceadmin@ngroadracing.co.uk) 07580 094577

For more information and our new race entry, membership system, go to  
[www.ngroadracing.co.uk](http://www.ngroadracing.co.uk)

Trade Accounts with huge discounts offered for



Find your parts on line, send the part number to Selina at [Raceadmin@ngroadracing.co.uk](mailto:Raceadmin@ngroadracing.co.uk) and we will do the rest.  
Enquire today.