BIKE NO ALLOCATED:

# CLIFFHANGER PROMOTIONS

## STANDING & FLYING ¼ MILE SPRINTS

**VENUE: Dalefield Road, Carterton**
CONTACT: 06 379 8081 or 7 Plimsoll Street, Carterton

MNZ PERMITTED EVENT

## ENTRY FORM

| | | |
|---|---|---|
| Surname: | First Name: | Other Initials: |
| Postal Address: | | Email: |
| Home Phone: | | Work Phone: |
| MNZ Licence No: | | Expiry Date: |
| Emergency Contact Name: | | Emergency Contact Phone: |

**Machine Details:**

| | | | |
|---|---|---|---|
| Bike Make: | Bike Model: | Capacity: | Year of Manufacture: |

**ENTRY FEE: $30 + $20* - MOTORCYCLES UP TO AND INCLUDING 600cc**
**$37 + $20* - MOTORCYCLES OVER 600cc**
* there is a $20 rider insurance levy charge for ALL riders

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Riders Briefing 9.45am @ Start Line

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I have read and understood the MNZ indemnity form (details on reverse) and have signed it, and agree to accept and abide by all the MNZ rules and regulations set down for this event, and accept that **CLIFFHANGER PROMOTIONS**, its officials and property owners accept no responsibility for any injury or damage whatsoever it may have caused, to person and/or property.

I acknowledge that by signing this entry form, I may be subjected to a drug/alcohol test at any time. I agree to such testing. I further agree that my name can be openly published by MNZ as having taken part in a drug/alcohol test together with the result of that testing.

**CLIFFHANGER PROMOTIONS**, reserves the right to make alterations to the program as circumstances make it necessary.

Signed:

# DISCLAIMER OF LIABILITY

TO **CLIFFHANGER PROMOTIONS** and Motorcycling New Zealand Inc.

1. I have read the Supplementary Regulations for this competition and agree to be bound by them on the General Rules of Motorcycling NZ, Inc.
2. I am aware that the sport of Motorcycle Competition might;
   a) Cause me injury, serious or otherwise
   b) Damage my property
2. I wish to take part in the **CLIFFHANGER PROMOTIONS** event despite the above risks.
3. Neither I, nor anyone associated or connected with me, will make any claim against you or your officers, employees or agents in respect of:
   a) Any injury suffered by me; or
   b) Any damage to any of my property regardless of how the injury or damage occurs
4. I will indemnify you against all claims, damages or losses (including costs) which you incur as the direct or indirect result of any injury to me or damage to my property.
5. I am physically fit and there is no health or other reason why I should not participate in the sport of Motorcycle Competition or events.
6. I am aware that this disclaimer will not affect any legal obligations you have to me, which you cannot contract out of under New Zealand law.
7. I agree that in the disclaimer “my property” includes any property owned by me or in my possession or under my control.
8. I agree that this disclaimer will be binding on my family, my heir, my legal assign and my administrators and executors.
9. I accept that stripping and re-assembly for Technical Checks are at my cost.
10. Minimum protective gear require to be worn as per the motorcycle regulations stipulated in the MNZ Manual of Motorcycle Sport June 2003 and any subsequent amendments. See ww.mnz.co.nz for further details.
11. I consent to the details contained in this form being held by **CLIFFHANGER PROMOTIONS**, for the purpose of the promotion and benefit of the race meeting concerned, and motorcycling in general. I acknowledge my right to access and correction of this information. This consent is given in accordance with the Privacy Act, 1993.
12. I further certify that the information given on this form is correct.
13. MNZ supports the FIM/IOC Charter on drugs in sport. MNZ uses the services of the NZ Drug Sports Agency (NZDSA) to professionally carry out the testing. I acknowledge, by signing this form, I may be subjected to a drug/alcohol test at any time. I agree to such testing. I further agree that my name can be published by MNZ as having taken part in a drug/alcohol test together with the results of that testing.

Dated: _____

Signature of Rider: _____

Name of Rider: _____
(Please print clearly)

MNZ Licence Number: _____