



2017 Track Licence application form

for Race, Speed and Kart venues

Prior to application being made for an Organising Permit, the appropriate Track Licence must have been issued for the specific Venue to be used. The Track Licence must be in place for a minimum of **60 days** prior to an International Event, or **30 days** prior to a National Event.

Please write clearly in BLOCK CAPITALS

Venue:	
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Club/Organisation details

(to whom the Track Licence will be issued and dispatched)

Club/Organisation:	
Contact name:	
Address:	
Telephone number:	
Email address:	

Previous licence details

Number & date of issue of most recent Track Licence:	
Date of most recent MSA venue inspection:	

Fees (VAT inclusive)

Date of event (only for a single-day event):	
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Race:		Speed:		Kart:	
Race International:*	£6645	Speed International:	£1030	Kart International:*	£875
Race National A:	£3340	Speed National A:	£860	Kart National A:	£840
* plus FIA fee		Speed National B:	£610	Kart National B:	£610
		Speed Clubman:	£610	* plus CIK fee	

- Notes:** a) For venues with no more than one single day meeting per year, half of the above fee is charged. (Not applicable for International or Truck meetings)
b) Where a number of categories are covered, only the highest value fee is payable

Office use only:	Passed to Sales:	<input type="text"/>	Chq/BACS:	<input type="text"/>	Amount:	<input type="text"/>
	Licence Grade:	<input type="text"/>				

Venue details

Venue address:	
Telephone number:	
Email address:	
Website:	
Nearest town (& distance):	
Location of the venue, with reference to major roads and towns/villages etc.:	
Postcode for use with 'sat-nav':	

Course details

Direction of running:*	
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** Indicate as applicable*

	Name	Length (km)	Width (m)	Discipline*	Grade*
Circuit 1:				<input type="checkbox"/> R <input type="checkbox"/> DR <input type="checkbox"/> S <input type="checkbox"/> K <input type="checkbox"/> HC <input type="checkbox"/> T <input type="checkbox"/> RX	<input type="checkbox"/> International <input type="checkbox"/> National A <input type="checkbox"/> National B <input type="checkbox"/> Clubman
Circuit 2:				<input type="checkbox"/> R <input type="checkbox"/> DR <input type="checkbox"/> S <input type="checkbox"/> K <input type="checkbox"/> HC <input type="checkbox"/> T <input type="checkbox"/> RX	<input type="checkbox"/> International <input type="checkbox"/> National A <input type="checkbox"/> National B <input type="checkbox"/> Clubman
Circuit 3:				<input type="checkbox"/> R <input type="checkbox"/> DR <input type="checkbox"/> S <input type="checkbox"/> K <input type="checkbox"/> HC <input type="checkbox"/> T <input type="checkbox"/> RX	<input type="checkbox"/> International <input type="checkbox"/> National A <input type="checkbox"/> National B <input type="checkbox"/> Clubman
Circuit 4:				<input type="checkbox"/> R <input type="checkbox"/> DR <input type="checkbox"/> S <input type="checkbox"/> K <input type="checkbox"/> HC <input type="checkbox"/> T <input type="checkbox"/> RX	<input type="checkbox"/> International <input type="checkbox"/> National A <input type="checkbox"/> National B <input type="checkbox"/> Clubman

** Clearly tick as applicable*

R = Car Race; **S** = Sprints; **HC** = Hillclimb; **RX** = Rallycross; **DR** = Drag Race; **K** = Kart Race; **T** = Truck Race

Start & finish line position(s) (including method of marking):	
Scrutineering area (location, facilities, Parc Fermé etc.):	
Noise testing area location:	

Rescue and medical services

Number of ambulances:		Number of medical staff:	
Number and location of Rescue Unit(s) (race/speed/rallycross):			
Location of ambulance(s):			
Location of first-aid headquarters/ medical staff:			
Special features of course (type of surface, varying width etc.):			
Location of nearest outside telephone and number:			
Address and telephone of nearest hospital available to receive casualties:			
<i>Race circuits only:</i>			
Medical Committee members:			
Chief Medical Officer:			

* Indicate as applicable

Marshals & recovery

Number and location of breakdown vehicles:			
Number of Observers posts:		Number of additional posts:	

Fire safety

Type(s) of extinguishers used:			
Date(s) of certification:			
No. of extinguishers around the course:		No. of extinguishers in the paddock:	
No. of extinguishers in Medical Centre:		No. of extinguishers in the pits area:	
No. of extinguishers in Scrutineering bay:			

Details of fire tenders and crew, when required (see (E)7.4) and location(s):			
Vehicle 1 location:		Extinguisher type:	
Equipment:		Number:	
Vehicle 2 location:		Extinguisher type:	
Equipment:		Number:	
Vehicle 3 location:		Extinguisher type:	
Equipment:		Number:	
Other:			

Communication systems

Type of communication system(s) available to officials around the course (e.g. telephone, radio):
Details of any CCTV system(s) under the control of the Clerk of Course:

Enclosed documents:

Land owners agreement:	
Venue plan: [^]	
Course plan (A4 size, suitable for incorporating into the Track Licence): ^{^^}	
Major incident plan:	
Minutes of the last Medical Committee meeting (Race circuits only):	

* Indicate as applicable

[^] A scale plan of the venue, in as much detail as possible, including all relevant key information, such as scrutineering, noise testing, medical centre, officials' enclosures etc.

^{^^} Detailed course plan showing all marshals/observers posts, safety vehicle locations, start/finish line(s), pit/paddock entry & exit.

2017 MSA Track Licence application (Race Circuits only)

Appendix 1 – Race Circuit Medical Centre

Venue:	
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Please indicate whether the Medical Centre meets the following requirements of (E)9.3 - (E)9.5:

Easy and level access for ambulance and stretchers	
Offers security from press and public	
Located in accordance with CAA requirements (allowing a helicopter to be used when necessary)	
Minimum of 3 sufficiently sized rooms, with adequate heating and lighting	
Resuscitation room capable of accommodating 2 patients minimum at one time	
Observation ward capable of accommodating 2 recumbent patients at one time (with total security in the event of death)	
Treatment area for small dressings and other minor procedures	
Administration area	
Shower	
Washing facilities	
Toilet facilities	

Please indicate whether the Medical Centre is equipped in accordance with the following requirements of (F)6.3:

Resuscitation:

Oropharyngeal airways (eight assorted sizes 2, 3 and 4)	
Pocket mask or similar device (with non-re-breathing valve and O2 inlet)	
Suction apparatus mains, battery, hand or foot operated (capable of 300mm Hg suction with reservoir not less than 350ml or overflow system with catheters and wide bore suction)	
Self-inflating manual resuscitator (with facemask and O2 reservoir)	
O2 supply (min size F1360 litres) and spare (with reducing valves, flowmeters as necessary)	
O2 tubing and masks	

Laryngoscopes x 2 (with spare batteries and bulbs)	
Endotracheal tubes cuffed x 6 (sizes 6.0mm to 9.0mm)	
Nasopharyngeal tubes x 3 (assorted sizes)	
Entonox with appropriate on demand delivery system (NB storage regulations)	
IV cannulae (six assorted sizes 1.0 to 2.0mm)	
IV administration sets x 6	
Hartmanns Solution (or equivalent) 1000ml x 6 (under the direction of a Medical Officer)	
Haemaccel (or equivalent) 500ml x 8 (under the direction of a Medical Officer)	
Pressure infusor	
Assorted syringes and needles	

Monitoring and diagnostic:

Sphygmomanometer aneroid/mercury (for latter consider regulations re Hg spillage)	
Non-invasive Blood Pressure Monitor	
Pulse oximeter	
Defibrillator with leads, electrodes pads/gel	
ECG	
Thermometer	
Blood glucose estimation kit	

Splints and dressings:

Large field dressings x 10	
Bandages and adhesive tape in assorted sizes	
Sterile non-adhesive and adhesive wound dressings	
Burn dressings and supply of sterile transparent bags assorted sizes	
Semi rigid cervical collars x 4 (assorted sizes)	
Splints	

Drugs:

Cardiac arrest drugs (according to the European and UK Resuscitation Council Guidelines (1992))	
A supply of parenteral analgesics	

Surgical:

Chest drainage kit	
Cricothyrotomy/Cricothyroidotomy kit	
Minor op sterile pack (with needle holder, scissors, artery forceps, scalpel and blades)	
Suture materials	
Skin antiseptic	
Small autoclave (recommended)	

Miscellaneous:

Scoop stretcher	
Casualty immobiliser (vacuum mattress)	
Stretcher for ambulance	

** Indicate as applicable*

2017 MSA Track Licence application (Kart Circuits only)

Appendix 2 – Kart Circuit Medical Centre

Venue:	
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Medical centre present?	
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If yes, please indicate whether the Medical Centre meets the following requirements of (F)6.4:

A room large enough to accommodate a single bed (for the observation and treatment of a single casualty)	
Equipped with first aid equipment (as required under HSE Code of Practice ACOP 1997 for organisations of 21 to 50 people)	
Eye wash station with 2 x 500ml of sterile saline solution	
Set of stiff neck extraction collars (including paediatric sizes)	
Portable resuscitation equipment	

** Indicate as applicable*

Appendix 3 – MSA bank details for BACS payment

Please transfer your remittance directly to our bank

Please include “Track Licence” in the payment reference

Our Pound Sterling bank details:

National Westminster Bank
Belgravia Branch
141 Ebury Street
London
SW1W 9QP

Sort Code: 60-07-29

Account No: 14742411

Account Name: Motor Sports Association

Swift Code: NWBK GB 2L

IBAN Code GB13 NWBK 6007 2914 7424 11