

2019 Motorsport UK Competition Licence Amendment Form



Use this form to apply for an UPGRADE or ADDITION to your existing 2019 Competition Licence

Surname:

First name(s):

Address:

Postcode:

Email:

Tel (Day): (Mob):

Date of birth: / / Licence Number:

I enclose my cheque/postal order made payable to **"Motorsport UK"**

I am paying by credit/debit card and I have listed the card details below

CARD DETAILS (Visa Electron and American Express cards not accepted)



Expiry date:

/

Amount to be paid: £

Card number:

/ /

Name on card:

Cardholder's address:

Cardholder's signature:

Daytime phone number:

ALL UPGRADES, ADDITIONS and REPLACEMENT LICENCES are processed within 3 working days.

3 Hour Express Handling Service

If you require your Licence Upgrade/Addition to be processed urgently, you should add £112.00 for the 3 Hour Express Handling Service.

I would like to Upgrade my Licence to:

Please enclose your 2019 Licence & Upgrade Card/Results
The cost of an upgrade is calculated as the difference between the Licence currently held and the cost of the Licence you are upgrading to, plus a £36.00 upgrade fee.

Licence Addition:

Please enclose your 2019 Licence

Replacement Licence (£29.00)

Change of contact details (No charge)

Your doctor's medical report on you

Are you:

- applying for an international licence? Yes No
- aged 45 or more and applying for a race, truck or long circuit kart race licence? Yes No
- over 18, applying for a race, truck or kart race licence (see note H9-12) and have never provided a medical report before? Yes No

If you answered 'Yes' to any of the above, you must have a medical examination and ask your doctor to fill in this section.

(You must pay any fee charged for the medical examination and for filling in this form)

To your doctor - Please read regulations 10.1.1 to 12.1.8 of the 'What you need to know about your motorsport' booklet (available at www.motorsportuk.org) before carefully filling in this section for your patient, ensuring that ALL questions have been answered. Note that ANY missed or unanswered questions will require further information to be submitted by you.

1. Doctor's practice stamp (together with your name and qualifications):

Height: (cm)

Weight: (kg)

Blood pressure: /

2. Are you the applicant's usual doctor? Yes No
3. Is the 12 lead resting ECG normal? (to be completed if aged UNDER 45 applying for an international licence) Yes No
- a. When was the 12 lead resting ECG performed? (Note - a resting ECG is valid for a period of 24 months) / /

If the applicant is aged **45 or over** and applying for an international licence, they must supply a written report of a stress-related ECG (see note H11)

The 'normal' answer to questions 4-9 is 'NO'. In respect of each 'YES' response, further details should be provided in the Doctor's comments box

4. Is there any evidence of abnormality of the heart or cardiovascular system? If 'Yes', give details in the doctor's comments box to the right. Yes No
5. Is there any evidence of a physical or mental condition in the applicants medical history? If 'Yes', give details to the right. Yes No

6. Has the applicant suffered from epilepsy, seizures or any other neurological conditions? If 'Yes', give details below. Yes No
7. Does the applicant have any physical abnormality or restriction of movement in the arms or legs? If 'Yes', give details below. Yes No
8. Were any abnormalities found in the urine analysis? If 'Yes', give details below. Yes No
9. Vision - to be recorded in metric Snellen acuity:
- a. **Uncorrected** (without corrective lenses) R eye / L eye /
- b. **Corrected** (wearing corrective lenses if necessary) R eye / L eye /
- c. **Vision with both eyes open** (wearing corrective lenses if necessary). See H10.1.10(a) /
- d. **Are corrective lenses (glasses or contact lenses) required for driving, including for competition?** Yes No
- e. **Is there any ocular history that suggests the possibility of visual field loss?** If 'Yes', give details below. Yes No
- f. **Were there any abnormalities on the colour vision (Ishihara) test?** If 'Yes', give details below. See H10.1.10(f) Yes No

If you have ticked 'YES' to any of the questions above, provide information in the box below

Doctor's comments:

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Please check your answers – Note that ANY unanswered questions will require further information to be submitted by you. Sign below to certify that you have examined the applicant in line with this form and the 'What you need to know about your motorsport' booklet available at www.motorsportuk.org

Your (doctor's) signature:

Date of medical examination:

 / /

Your Licence upgrade/addition must be issued within 3 months of the date of having this medical examination.

If your Licence upgrade/addition is not received and processed within 3 months of the above date, the medical will need to be revalidated by the examining doctor.