Before filling in this form, we suggest you read the ‘What you need to know about your motorsport licence’ booklet which can be found in the competitor resource centre of motorsportuk.org. Any questions? We are happy to help, call us on 01753 765050. Please note that all calls to and from Motorsport UK are recorded for training and monitoring purposes.

PLEASE NOTE. The RS Clubman licence is free of charge and will allow you to compete in following events run on a Motorsport UK Clubman Permit: Autocross/Clubcross (inc. Minicross), Autotest/Autosolo, Trials, Cross Country, Road & Navigational Rallying (inc. 12 Car & Scatter). You also get access to Motorsport UK Personal Accident Insurance and Member Benefits with savings on fuel, tyres, car insurance and more. Please log on to the member benefits portal at members.motorsportuk.org

If you wish to compete in any other event, please apply for a Motorsport UK Competition licence online or via the competition licence application form which can be downloaded from www.motorsportuk.org

**Did you know you may apply for your licence online?**

**SECTION 1A | YOUR DETAILS** (Please write clearly in block capitals)

<table>
<thead>
<tr>
<th>Surname</th>
<th>First name(s)</th>
<th>Gender</th>
<th>Date of birth</th>
<th>Address</th>
<th>Postcode</th>
<th>Mobile</th>
<th>Email address</th>
<th>Nationality</th>
</tr>
</thead>
</table>

If you are under 18, please provide contact details for your parent or guardian. For over 18s, please provide details for your emergency contact.

**SECTION 2 | YOUR MEDICAL SELF DECLARATION**

MANDATORY FOR ALL APPLICANTS. Both questions below MUST be answered by all competitors regardless of age. Failure to complete this section may result in your application form being returned to you and you will not be allowed to compete on the day. If you answer YES to either question, you must not compete until Motorsport UK has assessed your condition and issued your licence. In both cases, if you answer YES, please list and explain. Please see points 2 and 8 in the declaration (section 3).

1. Do you have any serious medical condition that affects your ability to drive and control a car? [ ] Yes [ ] No

2. Are you epileptic or do you suffer from any fits, fainting spells or blackouts or take any medication to control this? [ ] Yes [ ] No

If you answer YES to either question, you must not compete until Motorsport UK has assessed the date of diagnosis / injury / surgery, and the treatment / name of any medication you received or are still receiving.

Please log on to the member benefits portal at members.motorsportuk.org

Did you hold a Motorsport UK Competition Licence in 2019? [ ] Yes [ ] No

Did you hold a Motorsport UK Competition Licence prior to 2019? [ ] Yes [ ] No

Previous licence number __________________________

Please log on to the member benefits portal at members.motorsportuk.org

<table>
<thead>
<tr>
<th>Full name</th>
<th>Phone number</th>
<th>Email address</th>
</tr>
</thead>
</table>

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SECTION 3 | DECLARATION, APPLICANT SIGNATURE AND PARENT/GUARDIAN COUNTERSIGNATURE

1. I understand and will comply with the 'What you need to know about your motorsport licence' booklet which can be found in the competitor resource centre of motorsportuk.org.

2. I confirm that the information given on this application form and any supporting documentation is true and complete. I have taken full responsibility for completing the form and have not delegated any part of my responsibilities to any other person. If I provide false information I understand that I may face financial penalties and Motorsport UK may take disciplinary action against me, which may lead to my licence being permanently withdrawn. Failure to complete the form accurately with full disclosure may void insurance cover.

3. I will not do anything that could damage the reputation of or have any negative effect on motorsport generally. I understand that if I do so, Motorsport UK may take disciplinary action against me (see H6).

4. I undertake for the purpose of this application to never make use of drugs or of prohibited methods such as are defined in the Prohibited List of the World Anti-Doping Code of the WADA and by the Anti-Doping regulations of the FIA (see H38 or www.wada-ama.org) and understand if I do so, that Motorsport UK will take disciplinary action against me and my licence is likely to be permanently withdrawn.

5. Motorsport UK operates a zero tolerance policy to the use of drugs and alcohol and I therefore confirm that I will not take part in any practice or competition while under the influence of drugs or alcohol and understand if I do so, that Motorsport UK will take disciplinary action against me and my licence is likely to be permanently withdrawn.

6. I understand that if any medical conditions arise during the validity of my licence, including (but not limited to) accidents at motorsport events, I must inform Motorsport UK’s Medical Administrator prior to competing in any further motorsport events.

7. I agree to Motorsport UK’s Medical Consultant obtaining medical reports (if required) from any doctor who has ever seen me about anything which affects my physical or mental health. See H9.2 as it sets out your rights and the procedures for dealing with medical reports.

8. I understand Motorsport UK needs to collect, process and retain personal information about me including medical details contained in this application in order to issue my licence and to perform its obligations under the General Regulations, in accordance with its Data Protection Policy found at www.motorsportuk.org/data-protection or by contacting us at privacy@motorsportuk.org. I also understand Motorsport UK would like to use such information for the purposes, as specified in its current Data Protection Policy, which I have read and understood.

9. A competitor shall not have time off school to participate in motorsport without the prior written approval of their school (see H7.1).

10. I understand that any Competition Licence issued will remain the property of Motorsport UK that reserves the right to withdraw or suspend it at any time. The reason(s) for any withdrawal or suspension shall be stated (see H3.1.2).

11. I hereby consent to the collection, safe processing and retention of my current and future medical data, obtained by Motorsport UK, in pursuance of its obligations as the authorised national sporting authority.

Part 1

Applicant’s signature __________________________

Applicant’s name (block capitals) __________________________

Date __________/________/________

Part 2 (If under 18)

Parent or guardian’s signature __________________________

Parent or guardian’s name (block capitals) __________________________

Date __________/________/________

THANK YOU FOR YOUR APPLICATION

We hope you have a great year in motorsport, please visit our website at motorsportuk.org/Events/Find-Events to find out more about upcoming events in 2020.