**Event Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# Car Trackday Driver

**Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**DOB**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Post Code**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Telephone**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Group**: Novice / Intermediate/ Experienced **Make & Model of Car**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medical Conditions or Allergies**: Yes / No **If yes, Details** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Next Of Kin**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Relationship**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Next Of Kin Contact Number**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Driving Licence Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Driving Licence Expiry:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| --- |
| **PLEASE RETURN THIS FORM WITH A PHOTO OF YOUR DRIVERS LICENCE TO** |
| **SIMONE@LYDDENHILL.CO.UK** |  |
| **MOTOSPORT CAN BE DANGEROUS AND MAY LEAD TO INJURY OR DEATH****You must read and sign the following declaration as a condition of your participation in any trackday at the venue** |

In consideration for being permitted to participate in this trackday by Lydden Hill Race Circuit LTD (LHRC) I accept, agree and confirm that:

1. I am familiar with the nature of the activity I wish to undertake and accept that despite LHRC taking all reasonable precautions, damage or injury may occur. I accept these risks and take part in the activity at my own risk.
2. I am competent to take part, I am not taking any drugs (whether prescribed or otherwise) that may impair my ability to take part and I do not suffer from, and have no history of, any medical condition that could affect my ability to take part in this event. I agree that any medical conditions will be reported directly to the circuit medical office.
3. I will satisfy myself (by sighting lap or otherwise) before taking part in any on track activity and the track is acceptable to me in regards to its features and physical layout.
4. I have read, understood, agree and will comply to track regulations and I will promptly comply with the instructions and directions given by the organisers and instructors and any other representative of LHRC at all times whilst attending the venue. In the interests of safety the organisers or instructors may exclude me from further participation in the activity if they think I am driving recklessly or dangerously. I am aware that other participants will be on the track at the same time as me.
5. I hold a full driving licence and/or race licence appropriate for the vehicle I intend to drive and have produced it to the LHRC for inspection.

1. The Vehicle I intend to use is safe, complies with any relevant regulations (including without limitation relevant track regulations) and is fit to use for the purpose(s) for which I have attended the venue. Any in car camera or other equipment is safety and securely attached, using bolt-on mounting systems specifically designed for that purpose (not suction or other temporary mountings). I understand that LHRC insurance does not cover damage to my vehicle (whether controlled by me or any other person) during this activity, and that LHRC recommend that participants produce their own trackday insurance. The use of my vehicle is entirely at my risk and I accept responsibility for any damage caused to my vehicle (whether controlled by me or any other person)
2. If I use any vehicle or associated third party supplied by LHRC for any part of the activity I will satisfy myself that each such vehicle is acceptable to me and that I am fully comfortable and confident in my abilities to operate it competently and safely. I understand that I will be responsible for the first £500 (plus VAT) of accident damage caused to any LHRC vehicle in my control.
3. I understand that, notwithstanding paragraph 7 above, I shall always be liable for any damage caused by my reckless or dangerous driving and shall pay to LHRC an amount equal to the cost of any resulting repair or replacement.
4. I shall wear seat belts or harnesses at all times whilst in a vehicle and a properly fastened crash helmet at all times at all times whilst on circuit.
5. Neither LHRC, any instructor(s) or any company or organisation connected to the event (each ‘relevant person’) or any of their respective employees, agents or assistants, shall be liable for any injury, loss, damage, claims, costs, expenses or demands suffered directly or indirectly by me as a consequence of my attendance at or participation in this activity provided that nothing in this form shall exclude any relevant persons liability for personal injury or death caused by its negligence.
6. LHRC may take photographs and/or video footage of me during this event and LHRC may use such photographs or footage (including my likeness and image) for future promotional, marketing and publicity purposes in any media worldwide without notice or payment.
7. Any material filmed or recorded by me at the venue is for personal use only and is not for broadcast (whether for commercial reasons or otherwise) on any public transmission media anywhere in the world (including but not limited to internet, terrestrial, cable or satellite), and I agree to pay the sum of £25,000 if any material filmed should appear on such media.
8. I accept that I am not covered by personal accident insurance whilst at Lydden Hill Race Circuit.

## Participant Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To be completed if participant is under the age of 18 years old: you must read the declaration made by the participant above and agree to the terms below which create obligations on you in consideration for the participant taking part in this activity. By signing, you accept, agree and confirm that you are the lawful parent or guardian of the participant and, having read and understood this form, you consent to the participant taking part in this activity. You further agree to indemnify each relevant person (as defined in paragraph 10) in respect of any claim bought against such relevant person as a result of the participant’s involvement in the activity (save in respect of death or personal injury caused by the relevant person’s negligence).**

**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to Participant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**