



**ARMOY MOTORCYCLE ROAD RACING (AMRRC) LIMITED**  
**12<sup>th</sup> ARMOY OPEN ROAD RACE**  
**FRIDAY 30<sup>TH</sup> JULY and SATURDAY 31<sup>st</sup> JULY 2021**

**RACING NUMBER:**

**2021 ENTRY FORM** - Return completed forms to:  
 Competition Secretary  
 Chris Kennedy  
 12 Atlantic Road  
 Coleraine BT52 2PX  
 email: [racesec@amrrc.com](mailto:racesec@amrrc.com)  
 Tel: 075 4731 4828

**PERMIT No: 042/21**  
**EMN:**  
 Held under the General Competition rules and standing  
 Regulations of the MCUI (Ulster Centre) Ltd.

**All Classes - £90.00 Stg. (€105 Euro) each OR £270.00 Stg.(€315 Euro) for 3 or more races**

Entry Fees include Third Party Insurance and Benevolent (U.C. Licence holders only)

*Cheques payable to: ArmoY Motorcycle Road Racing Club Limited (or AMRRC Ltd)*

**Entry Fee Enclosed - £ \_\_\_\_\_ or \_\_\_\_\_ Euro**

**IMPORTANT NOTES:** Each Entry to be valid must,  
 Be received by the promoters no later than 12 Noon - **Monday 28th June 2021**  
 Be Accompanied by the requisite Entrance Fee (minimum £20 non-refundable deposit per race class entered)  
**NOTE: Entries will not be accepted on Race Day. NO ENTRIES ACCEPTED WITHOUT PAYMENT**  
*The return of this Form, properly completed, with fee etc to the promoters does not indicate final acceptance of the Entry by the promoters. There is no onus on the promoters to return an imperfectly completed form for amendment.*

**Rider Details** (PLEASE PRINT) **NAME:** \_\_\_\_\_ **Tel No:** \_\_\_\_\_

**Address (In full):** \_\_\_\_\_

**Nationality:** \_\_\_\_\_ **DOB:** \_\_\_\_/\_\_\_\_/19\_\_\_\_ **Postcode:** \_\_\_\_\_

**Email address:** \_\_\_\_\_ @ \_\_\_\_\_

**Licence No:** \_\_\_\_\_ **Governing Body:** \_\_\_\_\_ **Blood Group:** \_\_\_\_\_  
 (If MCUI please indicate if SC or UC)

*ACU, SACU and other non MCUI competitors must be able to produce start permission that includes insurance and a medical certificate on or prior to arrival at this event - You also need an MCUI (UC) visitors licence, **VISITOR LICENCE form can be downloaded at [www.amrrc.com](http://www.amrrc.com)***

**Year Started Road Racing:** \_\_\_\_\_ **How many years' experience at ArmoY Races:** \_\_\_\_\_

\*\*\*\*\*Are you a member of ArmoY Motorcycle Road Racing Club (special awards for club members of one full year). Please tick if yes

**NEWCOMER**  
**to ARMOY? (tick box if yes)**

**\*\* The Newcomers bus will leave the Start / Finish area on Friday at 10.30am sharp (Paddock Lane)**

**Next of Kin Name** (Please print) \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Address of your next of kin:** \_\_\_\_\_

**Postcode:** \_\_\_\_\_ **Daytime Telephone No:** \_\_\_\_\_ **Area code:** \_\_\_\_\_

**Location on Event Dates:** Friday \_\_\_\_\_ Saturday \_\_\_\_\_ **In paddock? Vehicle reg:** \_\_\_\_\_

**Team member contact details at Event**

**Name of Team contact:** \_\_\_\_\_ **Mobile Number:** \_\_\_\_\_

**Team Entrant Details** (PLEASE PRINT)

**Name:** \_\_\_\_\_ **Address (In full):** \_\_\_\_\_

\_\_\_\_\_

**Entrant licence No:** \_\_\_\_\_ **Governing Body by whom issued:** \_\_\_\_\_

**Applied for / Not accepted**

**Health and Safety at work Information:** The following information is required in order that the organisers can make provision for securing the health, safety and welfare for persons at work at this sporting event and for protecting others against risks to health or safety in connection with the activities of persons at work, as required under the health and Safety at work (NI) Order 1978.

- Select one of the following employment categories which may apply to you in relation to your participation in this event**
- Employee – someone working under a contract of employment. ie subject to the authority and instruction of the employer.
  - Non-employed – a person engaging in sport as a past-time/ for pleasure rather than for financial benefit or professional reasons.
  - Self – Employed – person who works for gain or reward otherwise than under a contract of employment, whether or not he him-self employs others.

<b>Example race entry details - Complete all details as you/your sponsor would wish them to appear in the Armoyp race programme</b>			
Make /Model or Type	<b>D &amp; G Smith YAMAHA R6</b>	cc	<b>600</b> Year <b>2019</b> Transponder No: <b>1234567</b>
FRIDAY 30 <sup>TH</sup> JULY			
<b>Supersport 1</b>			
Make /Model or Type		cc	Year Transponder No:
SATURDAY 31 <sup>ST</sup> JULY			
<b>Junior Support</b> (including 250GP, lightweight Supersport & 650cc Twins) Series inc <b>Supermono</b>			
Make /Model or Type		cc	Year Transponder No:
<b>Moto 3 (125cc GP)</b> inc <b>Supersport 300</b>			
Make /Model or Type		cc	Year Transponder No:
<b>Supersport Race 2</b>			
Make /Model or Type		cc	Year Transponder No:
<b>Junior Classic</b> (classes up to 250cc, 251cc -350cc only)			
Make /Model or Type		cc	Year Transponder No:
<b>Open Race</b> (201cc – 1010cc)			
Make /Model or Type		cc	Year Transponder No:
<b>Senior Classic</b> (classes 351 - 500cc & 501 – 1000cc only)			
Make /Model or Type		cc	Year Transponder No:
<b>Lightweight Supersport Race</b>			
Make /Model or Type		cc	Year Transponder No:
<b>650cc Supertwin Race</b> inc <b>Supermono</b>			
Make /Model or Type		cc	Year Transponder No:
<b>Senior Support Race</b> (501– 750cc Excluding 650cc Supertwins)			
Make /Model or Type		cc	Year Transponder No:
<b>'Race of Legends' Final</b>			
Make /Model or Type		cc	Year Transponder No:

No. of Races Entered	<input type="text"/>	<b>RIDING No:</b>	<input type="text"/>	<b>CHECKLIST: HAVE YOU ENCLOSED THE FOLLOWING?</b>
				Entry Fee <input type="checkbox"/> Start Permission (if applicable) <input type="checkbox"/>
				Copy of Visitors Licence (if applicable) <input type="checkbox"/>

**MOTORSPORTS CAN BE DANGEROUS AND MAY INVOLVE INJURY OR DEATH**  
**You MUST read and agree to the declaration and paragraphs below which are designed to create a legally binding relationship in return for you being allowed to enter and compete.**

- I confirm that the information in this entry form and my acceptance of the terms of my competition licence are correct.
- I confirm that I understand the nature of the competition I am entering and that I am competent to take part.
- I confirm that any vehicle I use will comply with the regulations and will be safe and fit for use in the competition.
- I will satisfy myself (by sighting lap or otherwise) before taking part that the venue and track is acceptable to me with regard to its features and physical layout (unless prohibited to do so).
- I will **NOT** take part if I have any doubt about my ability or the safety of the venue.
- I accept that competition in motorcycle sport may involve injury or death and I agree to take part at my own risk.
- Before taking part in the event I will read and be bound by and comply with any regulations and final instructions issued by the organiser, circuit owners and the Governing Bodies.
- I will not participate whilst under the influence of alcohol or intoxicating drugs and that if I am taking any prescribed medication I will inform the event promoter and seek approval to participate before taking part.
- I admit the right of the promoters to refuse any entry without assigning a reason.

*It is the responsibility of the competitor to present for scrutineering, machines and protective clothing which are safe in all aspects and comply with the general competition rules of the MCUI. All helmets for use on the day must be personally presented to the scrutineer on the day by the competitor.*

Signature of Rider: \_\_\_\_\_ Date: \_\_\_\_\_

**Armoyp Motorcycle Road Racing Club..... OFFICE USE ONLY**

DATE ENTRY RECEIVED:.....	Notes:	Riding Number:
Fee Received: £stg..... €Euro .....		<input type="text"/>
Cheque No: _____ Cash		