



## **MEETING RIDES DECLARATION AND INDEMNITY**

1.	Event Indemnity:		
This	indemnity applies to		Meeting
Мев	eting held at		Circuit / Location
On t	the date of:		
I the	e undersigned driver understand that my presence	e at this event and venue is ent	irely at my own risk.
	clare that the vehicle detailed on this form shair clarements detailed in the various National Sportin		n every respect complying with the Safety and Eligibility les.
curr		_	es as determined in the Appendices and Schedules of the be bound by them and by the National Sporting Code of
clair affil prov prov toge loss what that any	ms against and (severally) to hold harmless, ind iated clubs and entities, race and/or event orgoiders and operators, owners and tenants of prividers and operators, officials, fellow competitors, either "the Indemnified Parties") in relation to all or damage to persons or property of myself, an itsoever, caused or arising out of or in connections such death, injury, loss or damage may have been	emnify and keep indemnified ganisers and promoters, the in ate property (including land, but and the directors, officers, se losses, actions, expenses, costs, d/or my team (including driver in with this entry or taking parten contributed to or caused by	And the Meeting or Events detailed, I agree not to pursue MotorSport New Zealand Inc, its members, associated or aviting club and entity (or entities), race circuit owners, alidings and/or fixtures, fittings and chattels) traversed, or rvants, representatives and agents of those entities (all liabilities, claims and demands in respect of death, injury, s, co-drivers, passengers, management and/or mechanics) in the events to which this entry relates, notwithstanding the negligence of any of the Indemnified Parties and/or by ceable by, each of the Indemnified Parties (in accordance)
take	· ·	_	r Marshals. I, the named Driver will brief any passengers I uncouple the safety harness fitted to the vehicle and how
	clare that should I at the time of any event this porary which is likely to detrimentally affect my c		ing from any disability of any kind whether permanent or fitness to drive, I will not participate.
l coi	nfirm that I have not consumed any illegal drugs o	or alcohol with 24 hours of this o	event.
	nfirm that any legal or prescribed drugs that are guidelines of the health professional who prescrib	•	accordance with the manufacture's guidelines provided or
Nan	ne:	Class:	Car Number:
Sign	nature of Driver:	Date:	

## 2. Declaration by Passenger:

I the undersigned passenger understand that my presence at this event and venue is entirely at my own risk.

I acknowledge that I must obey the instructions of the Driver, Crew, Event Organisers, Officials and/or Marshals. I confirm that I have been briefed on basic event safety procedures and how to wear and subsequently uncouple the safety harness fitted to the vehicle or vehicles that I will ride in during the event.

I confirm that my health is not altered by any legal/illegal drugs or alcohol nor do I suffer from any medical condition that may prevent me from participating in this activity safely.

I understand that if I am between the ages of 12 to 16, I am required to present either a valid Junior Competition licence or an underage indemnity form signed by my parent or guardian. I declare that I am over the age of twelve and have read and understand these declarations prior to signing in the appropriate space below.

Car No.	Passenger's Name:	Age Group:	Emergency Contact Name:
cai ivo.	r assenger s reame.	12-16	Emergency contact Nume.
		17-18	
	Contact Number:	19-25	
	Contact Number:		Control Novelor
		26-36	Contact Number:
		36-60	
	Signature:	61+	
		Gender:	
		F / M / Other	
Car No.	Passenger's Name:	Age Group:	Emergency Contact Name:
		12-16	
		17-18	
	Contact Number:	19-25	
		26-36	
		36-60	Contact Number:
	Signature:	61 +	
	oignature.	Gender:	
		F / M / Other	
		1 / Wi / Other	
Car No.	Passenger's Name:	Age Group:	Emergency Contact Name:
		12-16	
		17-18	
	Contact Number:	19-25	
		26-36	Contact Number:
		36-60	
	Signature:	61 +	
	Signature.	Gender:	
		F / M / Other	
		1 / WI / Other	
Car No.	Passenger's Name:	Age Group:	Emergency Contact Name:
		12-16	
		17-18	
	Contact Number:	19-25	
		26-36	Contact Number:
		36-60	
	Signature:	61+	
		Gender:	
		F / M / Other	
Car No.	Passenger's Name:	Age Group:	Emergency Contact Name:
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		17-18	
	Contact Number:	19-25	
		26-36	Contact Number:
		36-60	
	Signature:	61+	
		Gender:	
		F / M / Other	
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