

Rev and Go



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Le Petit Champ
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Wysall
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Send a message on the web site or email Rog to confirm your seat on the bus

MABLETHORPE SAND RACING SPECTATOR

DATE _____

CONSENT FORM

To be completed and signed by parent/carer.

BRIEFING INFORMATION

There is limited space for spectators on the mini bus going to Mablethorpe on race Sundays. This is only for supporters of our teams competing in sand racing.

Check with Rog that the bus is going and there is space!

We will leave two hours before sign on (see our web site diary page for dates and sign on times). Typically practice should have started by 1100. Racing will follow practice. Return will be after all races have finished, which is expected to be before 1600. We should arrive back in Cotgrave before 1830. Times can only be approximate.

Your son/daughter needs to wear warm/waterproof clothing and bring a packed lunch/drinks, or cash to buy food and drinks. No refreshments will be provided.

Time in Mablethorpe will not be supervised. Access to the beach in the area of racing is strictly controlled, spectators are not allowed. Viewing is from the steps above the beach, where care is needed to avoid the path of ambulances etc. Care is needed if you son/daughter goes into the paddock area on the beach, bikes run at high speed.

Some of the usual Mablethorpe attractions are open, we discourage anyone from wasting money in the arcades (please limit spending money). Perhaps the chippies may get some custom?

ACKNOWLEDGEMENT

I agree to my son/daughter** _____ (name)
(Date of Birth __/__/__) taking part in this trip. I have read the above briefing. I acknowledge the need for responsible behaviour. I permit Rev and Go to take photographs, videos, sound recordings and media broadcasts which include my son/daughter** and to use these in any media creating publicity or fund raising for the group.

All motorsport is dangerous. I understand that taking part in this trip creates exposure to a risk of death, becoming permanently disabled or suffering some other serious injury and I acknowledge that even in the event of negligence on the part of the trustees, organisers of racing, or venue owners or any individuals carrying out duties on their behalves being a contributory cause of any part of any serious injury that may be suffered, the dominant cause of any serious injury will always be my voluntary decision for my son/daughter** to take part in this activity.

MEDICAL INFORMATION QUESTIONNAIRE

(a) To the best of your knowledge, does your son/daughter** suffer from any condition requiring medical treatment, or medication? (If YES, please give brief details below.) **YES/NO****

(b) To the best of your knowledge, has your son/daughter** been in contact with any contagious or infectious diseases or suffered from anything that may become contagious or infectious? (If YES, please give brief details below. Subsequent contact must be notified as soon as is possible) **YES/NO****

(c) Is your son/daughter** allergic to any medication? (If YES, please specify below) **YES/NO****

(d) Has your son/daughter** received a tetanus injection in the last 5 years? **YES/NO****

DECLARATION

I agree to my son/daughter** receiving emergency medical treatment, including anaesthetic, as considered necessary by medical authorities present. I will contact Rev and Go without delay if any of the information given above or below changes. I may be contacted by telephoning on the following numbers:

I am :

Name : _____

Address : _____

_____ Post Code _____

Phone Home _____ Times _____

Mobile _____ Times _____

Work _____ Times _____

If I am not available as above, please contact:

Name : _____

Telephone number(s) : _____

Address : _____

_____ Post Code _____

The family doctor is:

Name : _____

Telephone number : _____

Address : _____

_____ Post Code _____

Signed _____ (Parent/Carer**) Date _____