



Motorcycle Union of Ireland (Southern Centre) Ltd

t/a

Motor Cycling Ireland

(Referred to as MCI in this form)

Unit 18 The Beat Centre, Balbriggan Co Dublin

Phone: 01 8020480 Fax 01 802 0481

Email: office@motorcycling-ireland.com Website: www.motorcycling-ireland.com

Registered in Ireland Reg no: 98070

2014 APPLICATION FORM FOR COMPETITION LICENCE For Adult and Junior Competitors

Licence Type A- Road Race	Fee €80
Licence Type B -Short Circuit, Hillclimb, Sprint	Fee €80
Licence Type C- Motocross, Grasstrack, Enduro, Trials	Fee €80
Licence Type J- Junior	Fee €20
Licence Type X- One Day Licence for Motocross, Grasstrack, Enduro, Trials, Hillclimb, Drag Racing, Sprints.	Fee €15

See notes on page 3 for details of licences

Notes

NB: Applicants for any type of licence must have attended an Anti-Doping Educational Seminar. Details on MCI Website. This is a new requirement of the Irish Sports Council.

- 1) All applicants should familiarise themselves with the General Competition Rules (GCRs) of MCI and the Standing Regulations applicable to their discipline. These can be downloaded from the MCI website www.motorcycling-ireland.com (click on recourse/ relevant forms.)
- 2) All applications for persons under the age of 18 must be signed by his/her parent or legal guardian.
- 3) A passport size photograph of the applicant must accompany each application. The photo must be full face only: no caps/helmets etc.
- 4) Issue of the licence may take up to 14 days from date of Application.
- 5) All applicants must be a current member of a club affiliated to MCI.
If assistance is required in completing the form the applicant should contact the secretary of his/her club.
- 6) Payment may be made by Debit/Credit Card . Payment details are on the MCI website.

Card Number:

Expiry Date:

Issue No: Start Date:

Last three digits on rear of card:

Card Holders Name: _____ Card Holders Signature_____

Applicants Details: (All Block Capitals)

NAME: _____ DATE OF BIRTH _____ Male/ Female

ADDRESS: _____

PHONE: _____ MOBILE _____ EMAIL: _____

This is a first Application for a MCI Competition Licence: Yes / No

Type of Licence been applied for: _____ Previous Licence Number

If the application is for a Type X one day licence please state event and date:

A Riding number for Motocross / Grasstrack is required: Yes / No

A Flag Seminar attended (applies to applicants for Type A and Type B Licences)

Venue: _____ Date: _____

Training Seminar attended (applies to first time applications for Type B Licence)

Venue: _____ Date: _____

Anti Doping Educational Seminar attended (applies to all applicants)

Venue: _____ **Date:** _____

PARENTS/ LEGAL GUARDIAN DETAILS: (applies only to Applicants under 18 years)

NAME: _____

ADDRESS: _____

PHONE: _____ MOBILE: _____ EMAIL: _____

MCI CLUB MEMBERSHIP CONFIRMATION:

Name of Club: Unique Club Membership Code:

Club Officials signature: Club Stamp:

Position: Date: / /

TYPE A - ROAD RACE (Entitles the holder to take part in any MCI / MCUI Ulster Centre events.)

Applicants must be 18 years or older

Applicant must have competed in a min of 6 Short Circuit meetings held over more than one venue and must have completed

80% of the full distance in a minimum of two finals. He/ she must have shown a general competence in his/her riding skill.

Applicants for a renewal must have attained 83% of the winners time in his/her class in a minimum of 3 Road Races within the last 2 years.

A type A licence holder must return his/her previous licence to the licence registrar.

See further requirements in the GCRs.

All applications for a Type A licence will be subject to approval by the Road Race Committee.

All applicants must attend a Flag Seminar and Anti – Doping Educational Seminar annually (details on the website)

TYPE B - OPEN SHORT CIRCUIT (Entitles the holder take part in Short Circuit / Sprints / Hillclimb events held under the auspices of MCI or MCUI (Ulster Centre)).

Applicants must be 18 or older with the following exceptions

Minimum age of 12 for up to 125cc production machine events.

Minimum age of 13 for events using, 125cc Grand Prix, 250cc 4 Stroke twin cylinder production machines and 450 cc 4 Stroke single cylinder (Moto450) machines.

Minimum age 15 for events using up to 650cc Supertwin, single or twin cylinder production based 250 cc

Grand Prix, and Super Stock machines, subject to the following restriction: applicants for this category licence must have competed for at least a season on machines eligible to be ridden by 13 year olds.

See the GCRs for further information regarding upgrading from Type B to Type A.

They will be subject to approval by the Short Circuit Committee.

All first time applicants must attend a MCI Training Seminar (details on the website.)

All applicants must attend a Flag Seminar annually.

TYPE C MOTOCROSS, ENDURO, GRASSTRACK, TRIALS, QUADS (Entitles the holder to take part in events run under the auspices of MCI / MRA. /MCUI Ulster Centre)

Applicants must be a minimum of 16 years:

An applicant who has reached his / her 15 birthday may apply for a **TYPE C Licence** restricted to **MX2** machines in Junior and Adult events.

Type X- ONE DAY LICENCE: MOTOCROSS, GRASSTRACK, ENDURO, TRIALS, HILLCLIMBS, SPRINTS, DRAG RACE

Applicants must be a minimum of 16 years of age.

An applicant who has reached his/ her 15 birthday may apply for a **TYPE X** Licence restricted to **MX2** Machine in junior and adult events.

Minimum 18 years of age for a licence for **Hillclimb Sprints Drag Race**.

The form” **Application for competition licence**” must be completed in full.

The licence may be used for one specified event only.

A maximum of 3 one day licences will be issued to any one applicant in one calendar year.

Applications must be submitted to the **Licence Registrar** 14 days prior the event.

TYPE J: JUNIOR LICENCE (Entitles the holder to take part in Motocross, Grasstrack, or Trials run under the auspices of MC I/ MRA / MCUI (Ulster Centre).

Motorcycle/ Quad

Applicants must be 4 years of age or older, on date of application, for electric bikes in Trials.

Applicant must be 6 years or older on date of application and be under 17 on January 1st in year of application for all other eligible motorcycles/ quads.

In all cases the junior rider may ride for the entire season in the class for which his/her licence is issued even though he or she may exceed the upper age limit as a result of when his/her birthday falls.

MEDICAL INFORMATION (YOU MUST COMPLETE THIS SECTION)

Please answer all the questions truthfully. A false declaration may have serious consequences.

Have you ever suffered any ,or, are you currently suffering from any of the following illness or conditions.?

	Y / N	
1. Epilepsy, fits, blackouts or any condition which may cause loss of consciousness?.....	<input type="checkbox"/>	<input type="checkbox"/>
2. Any condition which might cause dizziness, vertigo or loss of balance.....	<input type="checkbox"/>	<input type="checkbox"/>
3. Any mental or brain disorder such as a stroke, MS or Motor Neuron disease?.....	<input type="checkbox"/>	<input type="checkbox"/>
4. Any condition or operation (including spleen removal) involving your heart or main blood vessels or high blood pressure?.....	<input type="checkbox"/>	<input type="checkbox"/>
5. Any psychiatric or emotional illness or any alcohol/drug/substance misuse?.....	<input type="checkbox"/>	<input type="checkbox"/>
6. Diabetes? If 'Yes' please state whether treated by diet, tablets or insulin?.....	<input type="checkbox"/>	<input type="checkbox"/>
If 'Yes' – Eyesight Report and Medical Report, must also be completed		
7. Any condition affecting your vision or eyes, including colour blindness?.....	<input type="checkbox"/>	<input type="checkbox"/>
8. Have you been unconscious because of a head injury or suffered from concussion?.....	<input type="checkbox"/>	<input type="checkbox"/>
9. Any loss of strength, feeling, control or movement of any of your limbs, head or neck?.....	<input type="checkbox"/>	<input type="checkbox"/>
10. Amputation of any part of your limbs with or without an artificial replacement?.....	<input type="checkbox"/>	<input type="checkbox"/>
11. Any kind of tumor or cancer?.....	<input type="checkbox"/>	<input type="checkbox"/>
12. Are you taking any medication?.....	<input type="checkbox"/>	<input type="checkbox"/>

(include all tablets, medicines etc. whether prescribed or bought over the counter)

Please use an attached sheet to give further details if you have answered 'Yes' to any of the questions above. Include the date you first developed the condition, details of any tests, investigations and of any treatment you have undergone, the names and addresses of any specialists you have seen, hospitals you have attended, and full details of any medication.

X If during the year for which the licence is issued you develop any of the illnesses or conditions referred to above or have an operation or been hospitalised for any reason you must surrender your licence to MCI and make a new application. Failure to surrender your licence may result in a suspension.

X If you have answered "Yes" to any question numbered 1-6 you must now and for future application submit a medical report.

X If you have answered "Yes" to any question numbered 7-12 you may be required, now and for future applications, to submit a medical report.

X If you are being treated for diabetes, you must have the eyesight report completed.

X If there is a query about any aspect of your fitness you may be asked to have an medical examination/report/or and eyesight report and / or exercise tolerance electrocardiogram (or stress ECG) at your own expense.

EYESIGHT REPORT (To be completed by your Doctor or Optician)

This report must be submitted by:

- Applicants, who for the first time are applying for a Type A or Type B licence.
- Applicants, renewing their Type A or Type B licence whose last eyesight report was 3 years or more.
- Applicants for Type A, or Type B who are aged 55 or over must submit this report annually.
- Applicants for Type A, B, C, Type X one day licence or type J who are being treated for diabetes (including controlled by diet).

To be completed by your Doctor or Optician.

Please read these notes before filling in this section for the applicant whose name is on the front of this form. The minimum corrected visual acuity must be 6/6 with both eyes open together. The minimum binocular field should measure at least 120 degrees along the horizontal meridian with no defects within the central 20 degrees. This should be a simple confrontation visual field examination rather than automated perimetry testing. The applicant, for any event except Trials, must have normal colour vision in that they can distinguish the primary colours red and green.

1. Uncorrected vision: Right eye: 6/..... Left eye: 6/..... Binocular: 6/.....

2. Corrected Vision: Right eye: 6/..... Left eye: 6/..... Binocular: 6/.....

3. Is the applicant's colour on normal?Y/N

4 Does the binocular field of vision comply with the above?.....Y/N

Applicant's name:
Signature of optician / doctor:

Name and Address of Optician / Doctor

Stamp

MEDICAL REPORT : (to be completed by your doctor)

This report must be submitted by:

Applicants who have answered “Yes” to any of the questions 1-6 on the Medical Information Questionnaire.

Applicants who, for the first time, have answered “Yes” to any of the question 7-12 on the Medical Information Questionnaire.

Applicants who are being treated for Diabetes.

Applicants for Type A or Type B who are aged 70 or over.

To your doctor

Please read these guidance notes before filling in this section for the applicant whose name is on the front of this form.

The person to be examined is applying for a licence to compete in motorcycle sport events. Particular care should be taken to ensure that the applicant does not suffer from any condition which might result in sudden loss of control of his/her motorcycle thus endangering other riders, officials and spectators. The controls of a motorcycle normally require the use of all four limbs.

The applicant must be able to control his/her motorcycle under fierce acceleration and braking forces. Competition places both physical and mental demands on the rider.

Limbs: The applicant should have sufficient power, co-ordination and sensation in his/her limbs to maintain full control of his/her machine. An applicant with an organic or functional loss of a limb or part of a limb may be referred to an MCI medical panel and be subject to “on track” assessment.

Deafness: A licence can be issued to an applicant with impaired hearing, but not to an applicant with a disturbance of balance.

Diabetes: A well controlled diabetic may be passed as fit to compete. They require evidence from their Consultant Diabetologist, or their own General Practitioner/regular medical attendant if are not under consultant care, that the diabetes is normally well controlled, that they are not subject

to hypoglycaemic or hyperglycaemic attacks (no significant episodes in preceding year), that they have no neurological or ophthalmic complication associated with diabetes and that they understand their diabetes, its monitoring and management.

Cardio-vascular system: In general, a heart attack or serious cardio-vascular disease would normally exclude a rider from speed events. Special attention should be paid to blood pressure and cardiac rhythm disorders. In such cases a certificate from a cardiologist including the results of any test the cardiologist considers necessary, must be submitted with this Medical Report form. **Any rider applying for an FIM/UEM International licence and over the age of 50 years must have an exercise tolerance electrocardiogram performed, and the result must be favourable.**

Neurological and psychiatric disorders: In general applicants with a serious neurological or psychiatric disorder will not be granted a licence.

Fits or unexplained loss of consciousness: A licence will not be issued if the applicant is an epileptic, has suffered a single epileptic fit or has suffered an unexplained loss of consciousness.

	Y / N
1. Are you the applicant’s regular medical attendant?.....	<input type="checkbox"/> <input type="checkbox"/>
2. Does the applicant have epilepsy, diabetes or any condition which may cause loss of consciousness?.....	<input type="checkbox"/> <input type="checkbox"/>
3. Does the applicant have any condition which may cause sudden loss of balance or co-ordination?.....	<input type="checkbox"/> <input type="checkbox"/>
4. Is there evidence of any progressive neurological disorder?.....	<input type="checkbox"/> <input type="checkbox"/>
5. Are there any signs of neoplasm which may be liable to metastasise?.....	<input type="checkbox"/> <input type="checkbox"/>
6. Is there any evidence of any disease or condition affecting the eyes or ears?.....	<input type="checkbox"/> <input type="checkbox"/>
7. Is there any abnormality of power, sensation, co-ordination or movement in any limb?.....	<input type="checkbox"/> <input type="checkbox"/>
8. Are any limbs or parts of limbs missing?.....	<input type="checkbox"/> <input type="checkbox"/>
9. Is there any abnormality of the heart?.....	<input type="checkbox"/> <input type="checkbox"/>
10. Does the applicant have hypertension?	<input type="checkbox"/> <input type="checkbox"/>
If 'yes', do they meet DVLA LGV/PCV Group 2 entitlement requirements? (Answer no if resting systolic BP consistently greater or equal to 180mmHg and/or diastolic greater or equal to 100mmHg. Answer no if treatment has side effects which may interfere with controlling a motorcycle)	
11. If the applicant has insulin dependent diabetes are there any signs of neuropathy, retinopathy or other complications?.....	<input type="checkbox"/> <input type="checkbox"/>
12. If the applicant has insulin dependent diabetes are they subject to episodes of hypoglycaemia or hyperglycaemia?	<input type="checkbox"/> <input type="checkbox"/>
13. Is the applicant suffering from any psychiatric illness?	<input type="checkbox"/> <input type="checkbox"/>
14. Is the applicant dependent on alcohol, drugs or other substances?.....	<input type="checkbox"/> <input type="checkbox"/>
15. Is the applicant taking medication?.....	<input type="checkbox"/> <input type="checkbox"/>

If 'yes' please give full details in the space below and confirm that the medication is not within the WADA prohibited classes of substances and prohibited methods. If the medication is banned and the applicant is applying for an **FIM World Championship or Prize Event** licence, then a TUE (Therapeutic Use Exemption) form will need to accompany this medical report. A TUE/WADA prohibited list can be downloaded from www.wada-ama.org or is available on request from the MCI

16. Is the applicant medically fit to hold a competition licence and to participate in motorcycle sport? Yes / No

17. I am unsure of the applicant's fitness and wish to refer him / her to the MCI Medical Panel. Yes / No

Please use this space to give further details:

Name & Address of Doctor including qualifications & MCI Number. Please use an official stamp

Applicant's name:

Signature of doctor:

Date: / /

DECLARATION & ACKNOWLEDGEMENTS – YOU MUST COMPLETE THIS SECTION

. Please read all the following statements and sign below.

I understand that if I have given any false information in this application you may take disciplinary action against me. This might include my licence being permanently withdrawn.

I will read and comply with the General Competition Rules and the Standing Regulations of MCI; I agree I am aware of the Code of Practice for Road Racing approved by the Irish & Northern Ireland Sport Council.

I understand that it is my responsibility to ensure that I have the correct licence/registration card for any competition I enter and that my licence/registration card will not guarantee my entry into, or acceptance into, any competition.

I consent to the collection and retention of my personal information by the MCI.

I consent to any necessary information concerning an injury at an event being given by the attending doctor/paramedic/first-aider to the Clerk of the Course or incident officer of the event and also to my own doctor and my relatives. The doctor may also give information to other persons, according to the doctor’s own professional ethical code.

• Acknowledgement and Agreement of the FIM Anti- Doping Code (Appendix 2) And the Irish Sports Council Anti – Doping Code

I, as a member of the MCI and/or a competitor in an MCI or FIM authorised or recognised meeting, hereby acknowledge and agree as follows:

I undertake to familiarise myself with the FIM & ISC Anti-Doping Code. I consent and agree to comply with and be bound by all of the provisions of the FIM & ISC Anti-Doping Code, including but not limited to, all amendments to the Anti-Doping Rules and all International Standards incorporated in the Anti-Doping Rules. I acknowledge and agree that the FMNs and the FIM have jurisdiction to impose sanctions as provided in the FIM Anti- Doping Code. I also acknowledge and agree that any dispute arising out of a decision made pursuant to the FIM or ISC Anti-Doping Code, after exhaustion of the process expressly provided for in the FIM & ISC Anti-Doping Code, may be appealed exclusively as provided in Article 12 of the FIM Anti-Doping Code to an appellate body and in last instance for final and binding arbitration to the Court of Arbitration for Sport. I acknowledge and agree that the decisions of the arbitral appellate body referenced above shall be final and enforceable, and that I will not bring any claim, arbitration, lawsuit or litigation in any other court or tribunal. I have read and understand this Acknowledgement and Agreement.

Irish Anti-Doping Rules

Motor Cycling Ireland has adopted the Irish Anti-Doping Rules as the anti-doping rules of MCI. Chapter 14 of the General Competition Rules (GCR)refer (<http://www.motorcycling-ireland.com/forms/GCR.pdf>)

Under the Irish Anti-Doping Rules, the Irish Sports Council carries out drug testing on behalf of MCI. Full details on the Irish Anti-Doping Programme are available at: www.irishsportsCouncil.ie/antidoping

Every applicant for a MCI Licence must have attended an Anti-Doping Educational Seminar.

• Acknowledgement of the risks of motorsport

Motorsport is an extremely dangerous activity. It is important that all competitors think very carefully about the risks they are undertaking whenever they compete.

It must be recognised by all competitors that there will be accidents and that a number of competitors may die, whilst others may be permanently disabled or sustain serious injuries and it could be you. All competitors must appreciate that they participate in motorsport entirely at their own risk.

One of the main risks in motorsport is obviously speed. Situations which would not give rise to major danger at low speed can have extremely serious consequences at high speed and in a competitive environment.

While the organisers will do their reasonable best to make the event as safe as possible, there will inevitably be occasions when mistakes are made. It must, however, be recognised by all competitors that where an accident occurs in such circumstances, any fault on the part of the organisers will not be the principal cause of any injury sustained. The dominant cause of any serious injury will be the fact that the accident happened at speed in a competitive environment.

The risk of accidents is one of the inherent risks involved in motorsport and every competitor must consent to this.

MCI is not prepared to accept personal injury claims (other than those covered under the Personal Accident Policy brought by competitors)who have willingly participated in what they know to be a dangerous sport. Any claims will be vigorously defended, and this form will be used as evidence of the competitor’s acknowledgement of the risks inherent in motorsport and that the dominant cause of any serious injury will be his/her voluntary decision to engage in competitive sport rather than any alleged negligence by the MCI or any other party involved in staging the event.

• Declaration

I have read and understood this form.

I understand that by taking part in motorsport I am exposing myself to a risk of death, becoming permanently disabled or suffering some other very serious injury.

I acknowledge that even in the event that negligence on the part of the MCI any other governing body, any race organiser, any circuit owner,or any individual who is employed by or carries out duties on behalf of any of these entities, were to be a contributory cause of any serious injury I may suffer, the dominant cause of any serious injury will always be my voluntary decision to take part in a high risk activity.

I accept that insurance arranged on my behalf by the organisers of events that I may enter specifically excludes liability between the participants.

I understand that this form may be used in litigation as evidence that any serious injury will be principally the result of my voluntary decision to engage in a high risk activity.

I acknowledge that my participation in motorsport is entirely at my own risk.

Your signature:

Date: / /

All competitors under 18 years of age must be accompanied to each event by their parent or legal guardian or responsible adult. The parent or legal guardian or responsible adult must attend signing on and be present for the duration of the event.

Declaration in respect of minors under the age of 18

I have read and understood the "Acknowledgement of the risks of motorsport" which appears above, I appreciate the dangers inherent in motorsport which include the risk of death or permanent disablement.

The minor does not suffer from any physical, medical or mental disability which would make it unsafe for him/her to participate as a competitor

I accept that it is my responsibility to ensure that the minor and I have read and understood the National Sporting Code of the MCI, Standing Regulations, Supplementary Regulations and Final Instructions subsequently issued and Entry Forms and that he/she will comply with them.

I accept that photographs or video footage may be taken of my child by officials dealing with safety issues or accident investigations. Photographs may also be taken for promotional purposes and may appear on the MCI website or in MCI publications.

To the best of my knowledge and belief the minor possesses the standard of competence necessary for events of the type to which his/her entries relate and that the machines entered will be suitable, safe and will comply with the Regulations for those events.

Parent's / Legal Guardian's name:

Signature:.....

Relationship to applicant:

Date / /

This Declaration must be signed by the Parent / Legal Guardian of an applicant under the age of 18

Parental Declaration Form

Name of Applicant _____

1. I will respect the rules and Procedures set down in Motorcycling Ireland's Code of Practice for children in Sport.
2. I will respect my child's team mates, officials, coaches, other parents as well as riders.
3. I will give encouragement and applaud only positive accomplishment whether from my child, his/her team, their opponents or the officials.
4. I will respect the officials and their authority during events.
5. I will never demonstrate threatening or abusive behavior or foul language.
6. I will encourage my child to treat other participants, officials, coaches and clubs with respect.

Name: _____ Signature: _____

Date: _____

CHECK LIST

	Y	/	N
Have you (or in the case of applicants under 18, your Parent, Legal Guardian) signed the form on page. 8	<input type="checkbox"/>		<input type="checkbox"/>
Have you attached a passport size photo with your name on the back?	<input type="checkbox"/>		<input type="checkbox"/>
Have you had your Club Secretary sign the membership confirmation?	<input type="checkbox"/>		<input type="checkbox"/>
Have you had the eyesight report completed? Check page 5 to see if it is required in your case?	<input type="checkbox"/>		<input type="checkbox"/>
Have you had the Medical report completed? Check page 4 to see if it is required in your case?	<input type="checkbox"/>		<input type="checkbox"/>
Have you entered your debit/ credit card details on the form?	<input type="checkbox"/>		<input type="checkbox"/>
Send completed documentation to MCI Unit 18 the Beat Centre, Balbriggan, Co Dublin.	<input type="checkbox"/>		<input type="checkbox"/>