

# CERTIFICATE OF UNDERSTANDING AND EXPRESS ASSUMPTION OF RISK

Please read carefully, fill in blanks and sign and date the form.

I, \* \_\_\_\_\_ \* (Consenting adults name) hereby confirm that the child in my charge must and will not participate in any activity unless I have read and understand the cadet session & circuit regulations and I have examined the circuit and I am happy with its conditions with respect to the speed that will be reached by the vehicle. I understand that I will abstain the child from participating should I not agree to accept the inherent risks involved.

I further state that the child in my charge is in good physical and mental health, eyesight (as corrected as appropriate) is up to the standard required for a road driving test and is not suffering from any other medical condition or disability which might make it unsafe for them to drive.

I further state that the child in my charge does not suffer from epilepsy, fits, recurrent blackouts, fainting spells or giddiness, back, neck or spinal complaint, dislocation, weakness or injury involving breaking of any limbs, diabetes, lung or heart disease or severe head injury, which might make it unsafe for them to drive.

I further state that they are not participating against medical advice and that they have not been diagnosed as having a terminal illness which might make it unsafe for them to drive.

I agree that it is my responsibility to ensure that the child in my charge is wearing adequate protective clothing to include crash helmet, neck brace, rib protector and gloves and that they must be of a correct size.

I accept that should I need to assist with my child on track, I agree to keep a good sense of awareness at all times and not to put myself in an unnecessary position of danger. I agree that I will wear a high visibility jacket/bib while on track and I understand that I am on track to help all drivers in the event of an accident and am not on track to give driving instructions to this or any other child in my charge.

I agree that I will keep a safe distance from the track limits as marked by white lines and that I will follow any instructions given to me by the staff at Rye House.

I will ensure that the child in my charge adheres to all circuit and pit lane rules and will endeavour to assist the staff in keeping the session safe for all participants.

## WARNING PHOTOGRAPHY AND FILMING IS NOT ALLOWED

I accept that photography and or filming of any sorts is prohibited during this session including the use of on board kart or helmet cameras.

By my signature I accept that I fully understand the terms of this document and the reasons why I have been asked to sign it and hereby confirm that I am signing it of my own free will.

**I FURTHER EXPRESS THAT I UNDERSTAND THAT KARTING AND ITS RELATED ACTIVITIES ARE NOT WITHOUT RISK AND THAT ACCORDINGLY I UNDERTAKE TO ACCEPT RESPONSIBILITY TO LOOK AFTER MYSELF AND THOSE AROUND ME IN A CAREFUL AND THOUGHTFUL MANNER AT ALL TIMES WHILST ON THE PREMISES.**

PLEASE HELP US TO HELP YOU HAVE AN ENJOYABLE KARTING EXPERIENCE BY:-

- 1) Obeying all the instructions that you receive immediately;
- 2) Looking after yourself at all times; and
- 3) Acting in a careful and considerate way towards everyone else on the premises.

**A FAILURE TO COMPLY WITH THESE BASIC REQUIREMENTS WILL RESULT IN AN IMMEDIATE CESSATION OF KARTING.**

I further state that I am of lawful age and legally competent to sign this certificate and that I have acquired the written consent of my parent or guardian as appropriate, I confirm that the driver is 5 years of age or over. If participant is aged 18 years of age or under, a Parent, Guardian or Adult "in loco parentis" must sign the following section.

**ALL NEW DRIVERS TO RYE HOUSE MUST FIND THE MANAGER ON DUTY TO BE GIVEN CIRCUIT RULES; I ACCEPT THAT THIS IS MY RESPONSIBILITY TO FIND MANAGEMENT AND THAT FAILURE TO DO SO RELINQUISH MY RIGHTS TO DRIVE ON THE CIRCUIT OR IN THE PIT LANE.**

Drivers First Name: \_\_\_\_\_ Surname: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_ County: \_\_\_\_\_ Postcode: \_\_\_\_\_

Tel Day: \_\_\_\_\_ Tel Mobile: \_\_\_\_\_

Next of Kin: \_\_\_\_\_ Next of Kin Contact No: \_\_\_\_\_

Email address: \_\_\_\_\_

**\*\*Signature of Parent or Guardian\*\*** If participant is a minor (under 18 years) by your signature, on their behalf release all claims that they and I have.

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

Full Name: \_\_\_\_\_

Data Protection Act – Your personal details will never be passed on to any person or organisation without your express permission in writing.

# KARTING LONDON