

Please fill in the following information as accurate as possible:

Name:	
Address:	
Address	
Town:	
County:	
Tel No:	
Mobile No:	
Vehicle Registration:	

Next of Kin	
Address:	
Address:	
Town:	
County:	
Tel No:	
Mobile No:	
Vehicle Type:	

e-mail address	@
----------------	---

Rider		Pillion		Support Crew	
-------	--	---------	--	--------------	--

Medical Advice Section

The PARAMEDIC'S can access this information via a call to the "fun run" registrar in a matter of minutes, should it be required.
 They will be the only people to access this information.
 Should you be involved in an accident, this life saving information could be vital to your survival.
 Please fill out the following information accurate as possible.

Please complete the following information the following:

Condition	Medication	Notes
Asthma		
Epilepsy		
Plates		
Pins		
Drug Allergies		
Heart condition		
Cancer		
Spinal injury		
Limb injury		
Brain injury		
Pace maker		
Contact lenses		
Hearing aid		
Others		
BLOOD GROUP		

You have the solid under taking of the fun run committee that this personal information will be treated is the strictest of confidence

Signed on behalf of the committee



Ms. Loretto Farrell
 Midlands Motorcycle Club

I declare the following: **RIDER,PILLION AND CREW FORM**

1.	I carry a current driving licence for the above vehicles, the only vehicles to be used by me on the "fun run". (Any changes during the run will have to be registered with the officials and added to this form before use)
2.	I confirm that my motorcycle with which I will participate will be fully covered by motor insurance for my participation in this event in accordance with the Road traffic Acts
3.	The vehicles I have entered above are in perfect mechanical order and are deemed to be in suitable mechanical order for the duration of the fun run.
4.	If my vehicle develops mechanical problems I will not continue until the fault is rectified. If the fault is not repairable I will retire the vehicle from the run.
5.	I will obey the rules of the road as laid down in the road traffic act.
6.	I will obey the instructions of the marshals and for whatever reason should they request that I retire from the fun run I will oblige WITH OUT QUESTION.
7.	I will accept the decision of the Paramedic's should I be deemed to require their assistance and exempt them from any material damage caused in aiding me.
8.	When parking up I will leave my vehicle in a safe fashion.
9.	I will attach the registration tag to the handlebars of my motorcycle for the duration of the run as required. If for any reason the tag is removed, I will get a replacement from the registrar.
10.	I will display my entry ref no: on the self-adhesive stickers on: A. my HELMET or B. my REAR MUDGARD
11.	I have read the safety sheet given to me at registration any will abide by it to the best of my ability.
INDEMINITY In consideration of the acceptance of my entry in this event I agree to save harmless and keep indemnified the Midland Motorcycle Club, including all Officers of the club its Servants or Agents from and against all actions, claims, costs, expenses and demands in respect of death of or of injury to or loss of damage to the person or property of myself or my pillion passenger howsoever caused arising out of or in connection with my taking part in this event notwithstanding that same may have been contributed to or occasioned by the negligence of the said club, it's Officers, Servants or Agents. Furthermore in respect of any part of this event on lands where third party insurance is not required by law this agreement shall in addition to the parties named above extend to all and any other competitors, their servants or Agents. I have read the above conditions of participation and will fully comply with same.	

I certify that the information I have given on this form to be correct, honest and true.

DATED the:		Day of:		2007
------------	--	---------	--	------

Signed by Participant:	
Signed by Pillion passenger:	
Signed by Crew Member:	
Signed by Registrar:	

THIS IS A LEGAL AND BINDING DOCUMENT

REMEMBER YOU ARE A DIPLOMAT

for

St Luke's Cancer Hospital



OFFICIAL REGISTRATION FORM

SPONSORED FUN RIDE

**Fri 27th June – Sun
29st June 2008**

In aid of

St LUKE'S HOSPITAL, DUBLIN

FOR: Cancer Cure, Control & Care

Entry ref:			
------------	--	--	--

Private and Confidential

This document is treated as private and confidential and will remain with the registrar for the duration of the "fun run".