



# Membership Form

## KARTING

Vereeniging Kart Circuit

<b>Class:</b>	
<b>Number:</b>	
<b>Name:</b>	
<b>Surname:</b>	
<b>Tel (W):</b>	
<b>Tel (H):</b>	
<b>Cell:</b>	
<b>Postal address:</b>	
	<b>Code:</b>
<b>Physical address:</b>	
	<b>Code:</b>
<b>e-mail:</b>	
<b>Date of birth:</b>	

### KARTING INDEMNITY

BEFORE YOU MAY USE THE VEREENIGING KART CIRCUIT FOR ANY PRACTICE OR DRIVING EXPERIENCE THIS INDEMNITY MUST BE COMPLETED AND SIGNED, EVEN IF YOU HAVE A MSA INDEMNITY NUMBER.

I (FULL NAME) \_\_\_\_\_ ID NO. \_\_\_\_\_

OF ADDRESS \_\_\_\_\_

e-mail \_\_\_\_\_ TEL. NO. \_\_\_\_\_

agree that neither Vereeniging Kart Circuit nor any promoter, organizer, guarantor and or sponsor of any competition/practice the owners of the property on which the practice is held, nor any government, provincial or municipal body, their agents, servants, representatives shall be liable under any circumstance for any damage done by any vehicle entered by/ridden in or attended upon by me in any competition/practice or for any personal injury-fatal or otherwise or loss of whatever kind sustained by myself or by any person riding/driving in or attending upon it or any person whatsoever, whether caused during any competition or practice run, or while the said vehicle is on any road or area forming part of the track or route, or any deviation there from or any approach by whatever means such damage, injury or loss may be caused and even though the same may be contributed to or caused by the willful act, neglected or default of any official, agent, servant or representative

of Action Karting or any promoter, organizer, guarantor or sponsor of the competition/practice or the owner/s of the property on which the competition/practice is held of any government, provincial or municipal body.

I hereby indemnify Action Karting, the promoter, organizer, guarantee and sponsor of the competition and the owner/s of any property on which the competition/practice is held and any government, provincial or municipal body and their agents, representative officials, servants and representatives against all and any legal liability for any damage or injury so done or sustained as aforesaid by myself or any other such persons as aforesaid. I further declare that I am aware of the risks, dangers and perils attendant upon motorcar/kart/motorcycle racing or any form of motoring competition/practice, which I hereby fully assume. This indemnity shall apply to all competitions/practice runs in which I take part in any capacity.

**Warning – Motorsport is dangerous. In view of the high speeds attained by the competitors/participants accidents can happen. The promoters and organizers of this event/competition/race meeting cannot guarantee your safety. You are present at your own risk.**

**Medical History**

I declare that I am medically fit to participate;

I confirm the following to be true and correct;

I have not been banned on medical grounds from participating in sport.

I am not under the influence of drugs and/or alcohol or any such substance.

In case of emergency, I authorize any qualified medical person to treat me.

**I AM AWARE THAT I AM RESPONSIBLE FOR THE COST OF MEDICAL TREATMENT**

Signed at Vereeniging this \_\_\_\_\_ day of \_\_\_\_\_ 200\_\_

Signature \_\_\_\_\_

Assisted by me: \_\_\_\_\_ (father/Guardian/Curator) delete what not applicable.

**If any signatory to this indemnity is under 18 years of age, the following addition is also to be completed.**

I (FULL NAME) \_\_\_\_\_

OF  
ADDRESS \_\_\_\_\_

I, in my capacity of father/guardian/curator hereby consent to the participation of my son/daughter/ward in any form of Motorsport. I further agree that this form of consent be read as part and parcel of, and together with the above mentioned form of indemnity which I have also read and signed on this day of the contents of which are fully understood by me and my son/daughter/ward. I hereby acknowledge that I am fully conversant with, and assume the risks, danger and perils of Motorsport.

Signed at Vereeniging this \_\_\_\_\_ day of \_\_\_\_\_ 200\_\_

Signature: \_\_\_\_\_ (Father/Guardian/Curator) delete what not applicable.

**MEMBERSHIP FEE : R100.00**

**BANKING DETAILS:**

**VEREENIGING KART CIRCUIT  
ABSA – VEREENIGING  
BRANCH CODE: 630 956  
ACCOUNT NO 405 992 7358**