

Licence Issue Hours
08h30 to 15h00
Monday to Friday
13h00 – Last working
day of the month



MOTORSPORT SOUTH AFRICA

Association incorporated under section 21

Reg. No. 1995/05605/08

e-mail msa@motorsportsa.co.za

<http://www.motorsport.co.za>

KZN: (031) 266-5640/Fax: 0866 123 464

First Floor, No. 9 (Formerly 108) Monza Close, Kyalami Park, Midrand. P.O. Box 11499 Vorna Valley, 1686

Telephone: **National Number** 0861 672 672 **JHB** 2711 466-2440. Fax: Int. 2711466-2450/0866 111 050

WC: (021) 556-1026/Fax:0866 123 465; P O Box 413, Table View, 7439

APPLICATION FOR 2009 COMPETITION LICENCE

- Note:**
1. No Licence Application will be processed if form is incomplete and unsigned.
 2. Faxed licence applications will not be accepted or processed.
 3. Licence is not refundable after it has been issued.
 4. Insurance only refundable within 21 days after purchase, provided competitor has not competed.
 5. Licence or Insurance is not sold on a Pro Rata basis.
 6. No swapping of licences within categories i.e. MX cannot be swapped for Quad, once licence has been issued and competitor has competed.
 7. Bank Details: Nedbank, Midrand, Branch Code: 168 642/ A/C No. 1686 076 711
 8. It is the competitors responsibility to ensure they have the correct licence.
 9. As from 1st January 2009 Competitors under the age of 18 years who are first time licence holders may obtain a Club licence at no cost. This dispensation does not include Medical Insurance and licences obtained via the Online system.

I.D. Number.....First Name (In full):.....Surname.....

Date of Birth.....Postal Add.....Postal Code.....

Province Tel (H).....Tel (W)Fax No.....

Cell No.e-mail.....Name of Reg.Club/Association:.....

Fill in type of licence required e.g. MX, Production Cars:..... Class:.....
(Proof must be produced it is not MSA's responsibility to contact the clubs)

Race: Black White Coloured Asian Sex: Male Female Development Competitor Y N

(As required by Ministry of Sport) (Compulsory)

(Compulsory)

LICENCE PRICES INCLUDE VAT (NB: All Junior competitors must produce copy of birth certificate on application)

LICENCE STATUS	Car Circuit Racing	Motorcycle Circuit Racing	Rallies Off Road Cars	Oval Racing	All other Categories	Postage Within S.A.	Postage Outside S.A.
INTERNATIONAL (Single Int. event licence fee on application i.e. event also being N/C)	2,500.00	2,500.00	2,500.00	On Application	1,460.00	20.00	50.00
NATIONAL CHAMPIONSHIP - CIRCUIT RACING (Premier Series Categories only)	1,850.00	900.00	N/A	N/A	N/A	20.00	50.00
NATIONAL CHAMPIONSHIP – CIRCUIT RACING (All Other Categories – Incl. Karting)	1,350.00	900.00	N/A	N/A	800.00	20.00	50.00
NATIONAL CHAMPIONSHIP – NON CIRCUIT	N/A	N/A	1,550.00	500.00	800.00	20.00	50.00
NATIONAL CHALLENGE, SERIES, TROPHY, ETC	1,200.00	N/A	900.00	N/A	600.00	20.00	50.00
REGIONAL CHAMPIONSHIP	500.00	500.00	500.00	500.00	500.00	20.00	50.00
Club	200.00	200.00	200.00	200.00	200.00	20.00	50.00

PERSONAL ACCIDENT/MEDICAL INSURANCE – BASIC BENEFITS

Option	Medical Exp.	Disablement	Death Benefit
A) Adults	up to R100,000.00	up to R100,000.00	R100,000.00
B) Juveniles (ages 6 to 13)	up to R100,000.00	up to R100,000.00	R100,000.00
C) Juniors (under 6)	up to R100,000.00	up to R 10,000.00	R 10,000.00
D) Adults (Compulsory)	up to R 60,000.00	up to R 30,000.00	R 30,000.00

No claims under R1000 will be paid out under the Policy

EXTENDED MEDICAL BENEFITS: up to R250,000, additional 50% on basic premium
(Only applicable to Options A, B & C)
up to R500,000, additional 100% on basic premium

Basic	Additional	TOTAL

(PLEASE TICK OPTION REQUIRED BELOW)

ANNUAL PREMIUMS (Inclusive of VAT)

OPTIONS	MX, Enduro, Quads Off Road Motorcycles	Motorcycle Circuit Racing & Supermoto	Oval Racing, Observed Trials	All other categories
OPTION A:	R1,440.00	R1255.00	R 580.00	R 695.00
OPTION B:	R 515.00	R 415.00	R 230.00	R 265.00
OPTION C:	R 310.00			R 160.00
OPTION D:	This option is only applicable for Club Licences and there are no extended medical Benefits i.e. no double up payments permitted			R 265.00

AMOUNT PAYABLE

Licence Fee	
Insurance	
Postage	
TOTAL	

If you have your own Medical Insurance cover and/or Medical Aid that covers motorsport participation, proof must be provided from your medical aid company. It is your responsibility to ensure you have sufficient Medical Cover either through MSA insurance or your own Medical Aid. **PLEASE NOTE: MSA will not accept a letter as proof from a Broker and MSA does not accept Hospital Plans.** Please familiarize yourself with the Procedures and Protocol which is available on the MSA website and is also published in the MSA handbook/CD. It is your responsibility as a competitor/entrant to ensure you are familiar with the rules pertaining to the insurance.

I, the applicant, hereby certify that:

- I understand that should I, at the time of an event in which I intend taking part, be suffering from any condition/disability (whether permanent or temporary) which is likely to prejudicially affect control of my vehicle/machine/kart, I may not take part in the event concerned unless expressly permitted to do so by MSA following a declaration of my condition/disability. I further confirm that I will familiarise myself with the MSA Anti Doping Code, WADA Code and Appendix L contained in the MSA GCR's. I further understand that, notwithstanding the issue of a licence to me by MSA it remains my responsibility not to participate in any event where a condition or disability suffered by me, may in any way affect my, or any other person's safety.
- I declare that, to the best of my belief, I possess the standard of competence necessary to take part in any event entered, and that any vehicle/machine/kart entered will be suitable and raceworthy/roadworthy, having regard to the speeds which will be reached.
- I declare that any vehicle/machine/kart entered by me, will comply with all regulations and specifications pertaining to the event entered/category of motorsport concerned. I accept, subject to my rights of protest and appeal, that action will be taken against me, as the entrant and/or driver and/or rider, in accordance with the provisions of MSA's rules if my vehicle/machine/kart is found not to comply with the relevant regulations and specifications.
- By signing this application form I agree to abide by and familiarize myself with the Medical Insurance Policy and Protocols which are printed in the MSA GCR's and posted on the MSA Website.
- By signing this application form I agree to MSA corresponding with me via SMS and/or e-mail.
- I confirm that I have read and understand the contents of the indemnity form on the reverse of this application form.
- I furthermore acknowledge that I, as a competitor as defined in GCR 19, accept that I am personally bound by MSA's GCR's and SSR's.
- I declare that the information furnished in this application is true and correct.

If the signatory to the above agreement is under 18 years of age then the following addition shall be made and completed:

I (full Names) (address)

In my capacity as parent/guardian/curator hereby acknowledge the abovementioned agreement, the contents of which are fully understood and accepted by me and by my son/daughter/ward* (delete which is not applicable).

SIGNED AT THISDAY OF 200 SIGNATURE OF APPLICANT/PARENT/GUARDIAN.....

**INDEMNITY/DECLARATION/UNDERTAKING TO BE SIGNED BY EVERY COMPETITOR/ENTRANT/DRIVER
AGREEMENT TO BE SIGNED BY EVERY RIDER, DRIVER, CO-DRIVER OR NAVIGATOR**

I have read and agree to be bound by the general competition rules of Motorsport South Africa, hereinafter referred to as MSA, and I agree to be bound by the supplementary regulations issued for any competitions in which I take part.

I agree that this form of consent be read as part and parcel of, and together with the abovementioned form of indemnity which I have also signed on this day and the contents of which are fully understood by me and my son/daughter/ward*.

I agree that neither MSA, nor the promoter, organiser, any vehicle owners or possessors, guarantor and/or sponsor of any competition or the owner/s of the property on which a competition is held, nor any government, provincial or municipal body, and their respective officials, agents, servants or representatives shall be liable under any circumstances for any damage done by any vehicle entered by or ridden in or attended upon by me in any competition or for any personal injury – fatal or otherwise – or loss of whatever kind sustained by myself or any person riding in or attending upon it or any person whatsoever, whether caused during any competition or any practice run, or while the said vehicle is on any road or area forming part of the track or route or any deviation therefrom 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 wilful act, neglect or default of any official, agent, servant or representative of MSA, or any promoter, organiser, guarantor or sponsor of the competition, or the owner/s of the property on which the competition is held or any government, provincial or municipal body.

I agree to allow a Doping Control/Alcohol Control Officer to examine me prior to, during or following a motor sporting event, meeting or competition. I further agree to allow a sample of my blood and/or urine to be taken for laboratory analysis by the Doping Control/Alcohol Control Officer concerned to determine the presence of alcohol or prohibited drugs as listed in the MSA Anti Doping Code, in accordance with the procedure for testing as prescribed WADA.

Should the analysis of the samples taken reveal the presence of alcohol or drugs or should I refuse to allow samples of blood and/or urine to be taken, I agree to MSA taking disciplinary action against me as envisaged in the Motorsport South Africa Anti Doping Code – as prescribed by WADA.

MSA IN ITS SOLE DISCRETION RESERVES THE RIGHT TO:

- i) Issue a licence to an applicant who may not have the stipulated qualifications but who can satisfy MSA as to his ability and/or experience, full particulars of which MUST be submitted in writing in support of his application.
- ii) Withhold a licence, or issue a lesser licence notwithstanding the fact that the applicant has the necessary qualifications in accordance with details required and furnished in this application.
- iii) Issue licences to drivers who do not hold current driver's licences (or a learners licence) where the nature of the event allows the participation of junior competitors or the standing regulations of MSA do not specifically require drivers to hold driver's licences.

Insofar as I, at any time, make use of or drive any vehicle, motorcycle, kart or quad of which I am not the owner, I warrant that I have the owner's permission to drive such vehicle, motorcycle, kart or quad, and that I am duly authorised on behalf of the owner to furnish the indemnities given above on behalf of the owner of such vehicle, motorcycle, kart or quad as well.

*if the signatory to the above agreement is under 18 years of age then the following addition shall be made and completed:

I hereby indemnify the MSA, the promoter, organiser, guarantor and sponsor of the competition and the owner/s of any property on which the competition is held and any government, provincial or municipal body and their respective officials, agents, servants and representatives against any legal liability for any damage or injury so done or sustained as aforesaid by myself or any other such persons as aforesaid.

I (full Names)
(address)
.....

I further declare that I am aware of the risks, dangers and perils attendant upon motorcar/motorcycle racing or rallying or any other form or motoring competition, which I hereby assume.

In my capacity as parent/guardian/curator* hereby acknowledge the abovementioned agreement, the contents of which are fully understood and accepted by me and by my son/daughter/ward* (delete which is not applicable)

I furthermore acknowledge that I, as a competitor as defined in GCR 19, accept that I personally am bound by MSA's GCRs and SSRs. I hereby acknowledge that I am fully conversant with, and hereby assume the risks, dangers and perils of motorsport.

SIGNED AT THISDAY OF 200

This indemnity shall apply to all competitions (held under the authority of a permit issued by MSA) or for which a waiver from the need of holding such a permit has been granted by MSA, in which I take part in any capacity.

SIGNATURE OF APPLICANT/PARENT/GUARDIAN/CURATOR:
.....

If any signatory to the above form of indemnity is under 18 years of age, then the following addition shall be made and completed.

In my capacity of parent/guardian/curator* hereby do consent to the participation of my son/daughter/ward* in any form of motor sport controlled by MSA and for which the said MSA may issue a valid competition licence to my said son/daughter/ward*.

2009 - DECLARATION FOR FITNESS TO COMPETE IN MOTORSPORT**MOTORSPORT IS DANGEROUS**

1. The MSA Medical Panel is responsible for ensuring that the competitor applying for a licence is physically and psychologically fit enough to control a motor vehicle, kart, motorcycle or quad at all times and will not endanger his/her own safety or that of other competitors. In the event of a query please contact the President of the Medical Panel in writing.
2. Regular participation in/or attendance of motorsport events may result in hearing loss. Competitors, service crews, families and officials must be aware that it is their responsibility to protect their hearing by wearing protective devices.
3. Have you been prohibited from participating in sport on medical grounds: Yes NO

If Yes please give details : _____

The following conditions **may** exclude a competitor from obtaining a competition licence:

- | | |
|------------------------------------|---------------------------------------------------------|
| 3.1 Loss of vision in one eye | 3.7 Deafness in both ears with no balance problem |
| 3.2 Traumatic Amputation of a limb | 3.8 Paraplegia for co-drivers |
| 3.3 Recent Cardiac Surgery | 3.9 Uncontrolled Hypertension |
| 3.4 Controlled Cardiac Arrhythmias | 3.10 Type 1 and Type 2 Diabetes with complications. |
| 3.5 Recent Transplantation | 3.11 Current / recent chemotherapy or Radiation therapy |
| 3.6 Drug or Alcohol abuse | 3.12 Use of banned substances (as detailed by WADA) |
| 3.7 Epilepsy and/or Convulsions | |

Cases of doubt must be referred to the MSA Medical Panel for a final decision.

4. A full list of excluding medical conditions is contained in the MSA Medical Code.

Medical History

	NO	YES	DETAILS
Epilepsy or Loss of consciousness for any reason			
Recurrent dizziness or headache			
Impaired vision not corrected by lenses			
Asthma or other lung diseases			
Allergy to medication or other substances			
Type 1 or 2 Diabetes Mellitus			
Heart or Heart Valve Problems			
Hypo or Hypertension			
G.I.T. Problems			
Kidney Problems			
Head injury or concussion			
Mental nervous disorder			
Blood disorder or bleeding tendencies			
Do you take prescription medication: If Yes (what)			
Bone or Joint Injury or disease: If Yes (what and when)			
Other Illnesses/Operations: If Yes (what and when)			

If you have Ticked YES – for any of the illnesses/injuries, please provide a Medical Certificate from the relevant, Specialist or Doctor. Failure to provide the necessary certificate might render any claims null and void by the MSA Insurers and you will not be issued with a licence or your licence will be revoked due to non compliance.

In accordance with the protocols of MSA's Anti-Doping Code all motorsport competitors should be aware that they may be tested for prohibited substances, both during and out of competition.

In accordance with this regulation I accept and understand that I may be tested for prohibited substances either during or out of competition. I further understand that, should I test positive on the samples submitted that I will be subject to disciplinary action as envisaged in the MSA Anti-Doping Code as prescribed by WADA.

I accept and understand all details listed above and further understand that in the event that I produced false information on this form my licence will be revoked with immediate effect, and that I will be personally responsible for any or all action instituted against me as a result of having provided false information.

I, certify that I am physically and psychologically **FIT** to take part in all categories of motorsport and should it be found that I am not fit I confirm that I accept that the Insurers will not entertain any claims submitted by myself

SIGNATURE OF COMPETITOR _____

DATE: _____

SIGNATURE OF PARENT/GUARDIAN: _____

DATE: _____