



2010-2011 ANNUAL RACE LICENSE APPLICATION / RENEWAL FORM

(Note: All Racing License applicants must be 15 years or older and undergo a medical)

ANNUAL RACE LICENSE **\$200-00** (please tick if applicable)

Racing License Application Indemnity

In consideration of the acceptance of my license application I DECLARE that to the best of my knowledge I have no medical condition or disability (including sight & hearing), have not suffered any fainting attacks, blackouts or seizures that may impair my ability to participate at the levels required for motor sport.

I AGREE for myself, my executors and assigns not to make any claim against the organisers / Thundercat Racing Association of NZ Inc and/or organisations affiliated thereto and/or all members of the said organisations, in respect of any accident or damage incurred at any time when a meeting or competition is under the control of the Thundercat Racing Association of NZ Inc and/or organisations affiliated thereto whether caused by other competitors, their representatives, their boats or otherwise.

APPLICANTS SIGNATURE:

NAME:

Indemnity by Parent / Guardian where applicant is under 20 years of age

I being the parent / guardian of hereby consent to him/her being permitted to take part in power boat racing and in consideration of such permission I waive all rights of action against the organisers / Thundercat Racing Association of NZ Inc and/or organisations affiliated thereto, and/or all members of the said organisations, in respect of any accident or damage caused by competitors, their representatives, their boats or any other cause whatsoever. I acknowledge and accept all clauses contained in the Indemnity signed by my charge above.

PARENT / GUARDIAN SIGNATURE:

In the presence of *(name & address of adult who knows the applicant but is not related to either signatories above)*

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WITNESS SIGNATURE: Date :

This application must be SIGNED, and accompanied with Membership, Boat registration, and License fees applicable (cheque payable to TRA-NZ). You must also supply a completed Medical Form if applying for a Race License.

**Return to - TRA-NZ Secretary, c/o Sandi Keen, PO Box 301515, Albany, Auckland 0752
or fax to 09-8321281 or scan and email to secretary@thundercatracing.co.nz**