



AINTREE

MOTOR CYCLE RACING CLUB

ACU Permit Number: 207317

NMN 10/2303

Course License Number: **007**

ENTRY FORM FOR ROUND 4 1ND AUGUST 2026

CLOSING DATE **22nd July** or when maximum permitted entries are reached.

Please fill in capitals. please email or post your entry form.

Aintree Motorcycle Club. Joanne Veevers, 18A Myers Road West, Crosby, L23 0RU

Email aintreeentryandmembership@hotmail.com

Riders full Name: _____ **DOB:** _____

ACU LICENCE NUMBER: _____ **Contact number:** _____

Full address : _____

Email: _____

Next of kin name and address: _____

Next of kin contact number: _____

Transponder number: _____ **Hire yes/no:** _____

Passenger full name: _____ **DOB:** _____

ACU License number: _____ **Contact Number:** _____

Full address : _____

Email: _____

Next of kin name and address: _____

Next of kin contact number: _____

CLASS ENTRY DETAILS

	CLASS	MAKE, MODEL & CC EG: YAMAHA YZF750cc	SPONSOR EG: AINTREE MOTORCYCLE CLUB
Class A	125GP inc Moto3		
Class A	FORMULA 400		
Class A	STOCK TWINS 650cc		
Class A	CB500		
Class B	SUPERBIKES 401-1300		
Class B	PRE-INJECTION 600		
Class B	PRE-INJECTION OVER 600		
Class C	OPEN 500 inc SUPERMONO		
Class C	STEEL FRAME 600		
Class C	SUPER TWINS		
Class D	POWERBIKES 501-1300		
Class D	GOLDEN ERA SUPERBIKES		
Class E	SUPERSPORT 600		
Class G	350-500 CLASSIC		
Class G	UNLIMITED CLASSIC		
Class G	POST CLASSIC UP TO 750		
Class G	EARLYSTOCKS		
Class H	PRE-INJECTION 600		
Class H	PRE-INJECTION OVER 600		
Class I	CLASSIC UP TO 250		
Class I	POST CLASSIC 125		
Class I	CLASSIC 251 – 350		
Class J	UP TO 750 TWINS		
Class J	FORGOTTEN ERA up to 500		
Class J	FORGOTTEN ERA Over 501		
Class K	OPEN SIDECARS		
PR6	ACE OF AINTREE PARADE		

ENTRY FEES	Cost	Total (£)
Sidecar Entry Fee	£190.00	
Solo Entry Fee	£155.00	
2 nd Class	£40.00	

3 rd Class	£40.00	
Race in as many classes as you like	£250	
PR6, ACE OF AINTREE PARADE, INC MEMBERSHIP MUST BE A MEMBER ,	£100	
Aintree Membership	£15.00	
Transponder Hire	£20.00	
LATE ENTRY FEE AFTER 22ND JULY	£30	
Please calculate the total fee for your requirements and pay using the method indicated below :		
Bank Transfer to Account Number - 88352145 Sort Code -602011; A/c Aintree Motorcycle Club Ltd. Cheque payable to Aintree Motorcycle Club LTD . Address: Joanne Veevers,18A Myers Road West, Crosby, L23 0RU TOTAL		

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ACKNOWLEDGEMENT OF THE RISKS OF MOTORSPORT	Please initial each item to Acknowledge
I/we understand that by taking part in this event I/we are exposed to a risk of death, becoming permanently disabled or suffering some other serious injury and I/we acknowledge that even in the event that negligence on the part of the ACU, the promoter, the organising club, the venue owner, or any individual carrying out duties on their behalf were to be a contributory cause of any serious injury I/we may suffer, the dominant cause of any serious injury will always be my/our voluntary decision to take part in a high risk activity. I agree that I am required to register on arrival by “signing on” at the designated place before taking part in any Practice Session or Race.	

ENTRY DECLARATION

I hereby declare that I have had the opportunity to read, and that I understand the National Sporting Code of the ACU, the ACU Standing Regulations, such Supplementary Regulations as have or may be issued for the event and agree to be bound by them. I further declare that I am physically and mentally fit to take part in the event and I am competent to do so. I confirm that I understand the nature and type of event I am entering and its inherent risks and agree to accept the same notwithstanding that such risks may involve negligence on the part of the organisers or officials	
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I accept that insurance arranged on my behalf by the organisers of events that I may enter specifically excludes liability between the participants. I understand that this form may be used in litigation as evidence that any serious injury will be principally the result of my voluntary decision to engage in a high-risk activity.	
I consent to details of any injuries I may suffer at this event being passed between all medical services and the Clerk of the Course. I have read and understood The Auto Cycle Union Ltd Data Protection Policy and consent to the collection and retention of my personal information by the ACU.	
I confirm that the machine(s) as described above which I shall participate on shall be suitable and proper for the purpose. I confirm that I am eligible to compete on the machines for which I have entered. I confirm that if any part of the event takes place on a public highway, the machine(s) described below shall be insured as required by the Road Traffic Acts, or equivalent legislation, and that they will comply with the regulations in respect thereof.	
I accept responsibility for any items borrowed from the Organiser during the course of the event. These items include but are not restricted to (safety clothing, transponders and accessories. I understand that I am liable for the cost or replacement of any items lost or not returned and non-payment or non-replacement of items borrowed may affect my entry into subsequent events.	
I confirm that I have not been refused an ACU License, nor had an ACU License suspended, nor have I been excluded from any ACU competition. I confirm that I am not currently suspended from ACU permitted competition nor on the ACU Stop List as a result of incurring a Concussion / Suspected Concussion injury.	
"I consent to the collection and retention of my personal information by the ACU"	

I HAVE READ THE ABOVE AND ACKNOWLEDGE THAT MY PARTICIPATION IN MOTORSPORT IS ENTIRELY AT MY OWN RISK. I AGREE THAT I AM REQUIRED TO REGISTER ON ARRIVAL BY "SIGNING ON" AT THE DESIGNATED PLACE BEFORE TAKING PART IN ANY PRACTICE SESSION OR RACE.

	Rider* (All applications)	Passenger* (Where applicable)
Signature		
Date		

* For riders and passengers **under 18** years of age - I accept the above conditions of entry to this event and give my approval.

Signature of parent or person with parental responsibility.		
Date		