



Date of event: June 1st, 2nd & 3rd 2024

# MNZ Permit Number: 20885

Entry closing date: Thursday 30/05/2024

**Event dinner:** Sunday, from 6.00pm at the Whaler (order and pay for your meal individually on the night)

Prize Giving: Monday, 4pm at the Whaler

Day	Friday	Saturday	Sunday	Monday
Address	The Whaler 49-51 West End, Kaikōura 7300	Trewin's Farm 186 Birches Rd, Oaro 7374	Dairy Farm Road 531 Dairy Farm Road, Peketa 7373	Schroder's Farm 202 McInnes Road, Kaikoura Flat, Kaikōura 7371
Sign on time	6.30pm to 9pm	-	-	-
Riders briefing	-	9.30am	9.30am	9.00am
Event starting time	-	10am	10am	9.30am

Rid	er's Name:			
Em	Email:			
Pho	one:			
Dat	e of birth:			
	ardian's name ider is under 18yrs of age)			
Ado	Address			
Do	you have a valid MNZ affilia	ted club membership?		
	YES, my club is:			
	NO, please sign me in with the PIONEER MOTORCYCLE CLUB (\$40)			
Do	you hold a current MNZ lice	nce?		
	YES, I have a licence, number: (add your licence number)			
	NO, I need to purchase a One Event Licence (\$35) (you will need to bring your helmet to the sign on. It needs to be a standard acceptable for use in MNZ events (MNZ rule 8.2a)			





Class	Grade	
Senior	Red	
Sidechair	Yellow	
Women	Green	
Junior	Blue	
Twin Shock	White	
Air Cooled	Orange	

Sidechair only:

Do	Does your passenger have a valid MNZ affiliated club membership?		
	YES, my passenger's club is:		
	NO, please sign my passenger in with the PIONEER MOTORCYCLE CLUB (\$40)		
Do	Does your teammate hold a current MNZ licence?		
	YES, my passenger has a licence, number: (add your licence number)		
	NO, my passenger needs to purchase a One Event Licence (\$35)		

Fees:

Description	Fees	Quantity	Sub total
Senior	\$100		
Junior	\$50		
One day (Senior)	\$40		
One day (Junior)	\$20		
Two days (Senior)	\$60		
Two days (Junior)	\$40		
Pioneer club membership	\$40		
One event licence (valid for the 3 days)	\$35		
		Total to pay:	

# Payment by direct credit:

Account number: 03 1592 0094585 00 Account name: Pioneer Motorcycle Club Inc.

# PLEASE BE SURE TO GIVE THE FOLLOWING INFO WHEN PAYING ONLINE

Particulars: Your Name / Code: Kaikoura Reference: YOUR MNZ Licence number or "OEL"



#### 2024 Kaikoura 3 Day Trial - Entry Form



## Disclaimer of liability:

1. I confirm that my machine complies with any technical rule(s) set out in the Manual of Motorcycle Sport and/or the Supplementary Regulations and that, to the best of my knowledge and belief, it is in safe working order and fit for competition.

2. I take full responsibility in respect of the conditions as set down and also understand that a spot check may take place on my motorcycle before, during or after the event for safety and other reasons.

3. I shall abide by any decision directed at me by the Steward of the Meeting. And understand that any competitor making a false declaration may be disqualified from the event.

4. I have read the Supplementary Regulations for this Competition and agree to be bound by them and the Manual of Motorcycle Sport, the MNZ Constitution, and the MNZ Code of Conduct.

5. I am aware that the sport of Motorcycle Competition might a) cause me injury; serious or otherwise b) damage my property.

6. I wish to take part in the 2024 Kaikoura 3 Day Trial despite the above risks.

7. Neither I, or anyone associated or connected with me will make any claim against you or your officers, employees or agents in respect of: a) any injury suffered by me; or b) any damage to any of my property regardless of how the injury or damage occurs.

8. I will indemnify you against all claims, damages or losses (including costs) which you incur as the direct or indirect result of any injury to me or damage to my property.

9. I am physically fit and there is no health or other reason why I should not participate in the sport of Motorcycle Competition.

10. I am aware that this disclaimer will not affect any legal obligations you have to me which you cannot contract out of under NZ Law.

11. I agree that in this disclaimer "my property" includes any property owned by me or in my possession or under my control.

12. I agree that this disclaimer will be binding on my family, my heirs, my legal assigns and my administrators and executors.

13. I accept that stripping and re-assembly for Technical Checks are at my cost.

14. I consent to the details contained in this form being held by the Hosting / Administering Motorcycle Club for the purpose of the promotion and the benefit of the race meeting concerned, and Motorcycling in general. I acknowledge my right to access and correction of this information. The consent is given in accordance with the Privacy Act 1993.

15. MNZ supports the FIM/IOC Charter on drugs in Sport. MNZ uses the services of Drug Free Sport NZ and other agencies to professionally carry out the testing. I acknowledge by signing this form I may be subjected to a drug/alcohol test at any time. I agree to such testing. I further agree that my name can be published by MNZ as having taken part in a drug/alcohol test together with the results of that testing.

Full Name	
Signature	

Please email entries to:

pioneertrials@gmail.com

### Or post to:

Pioneer Motorcycle Club c/- 22A Bevington Street Christchurch 8042

If you are mailing the entry form to us we need to receive it by Wednesday 29 May at the latest.