George Peach, Race Secretary, Ellerslie, 128 Malew Street, CASTLETOWN, Isle of Man, IM9 1LT Tel. 01624 822546 (H) 07624 471301(M) Email: entries@southern100.com



Official Use - Entry Form Number:

24/

2024 Blackford Financial Services Pre TT-Classic Road Races

Colas Billown Circuit, Castletown, Isle of Man. A National Competition

On Friday 24th, Saturday 25th and Sunday 26th MAY

Held under the National Sporting Code (4th Edition) and the 2024 Standing Regulations of the Auto-Cycle Union. Together with the Supplementary Regulations of Southern 100 Motorcycle Racing Ltd. and Final Instructions to be issued. PCL 028 ACU Permit No ACU 202206

NON ACU/SACU Licence Hol		chelle Haynes, ACU Roa I4 (0) 1788 566405	d Race Department	Michelle@acu.org.uk
		RIDER		
First Name(s):				
Address:				
Town:	County:	Country:	Post (Code:
Tel No: PLEASE STATE IF ACU LICENC Are you a Newcomer to th E mail Address:	E OR IF NOT WHICH FEE	DERATION		
Date of Birth D/M/YY:/_ Name of Next of Kin: Next of Kin <u>Home</u> Address:	Spou	use/Partner/etc.:	No. of Children	state ages:
Next of Kin's <u>Isle of Man</u> Add	lress, if on Island:			
I.o.M. contact in case of an e	mergency if N.O.K not c	on Island - Name:	Те	No:
		ASSENGER		
First Name(s):				
Address: Town:			Post Code	
Tel No: PLEASE STATE IF ACU LICENC Are you a Newcomer to th E mail Address:	Mob. No: E OR IF NOT WHICH FEE e Billown Circuit?	L DERATION	licence No:	
Date of Birth D/M/YY			ender: Marita	al Status:
Name of Next of Kin:	Spc	ouse/Partner/etc.:	No. of Childrer	n state ages:
Next of Kin <u>Home</u> Address:				
	Tel No (day):		(evening):	
Next of Kin's <u>Isle of Man</u> Ado				
I.o.M. contact in case of an e	mergency if N.O.K is no	t on Island - Name:	Tel	No:
- 1 -		ENTRIES C	CLOSE 29 TH FEBRU	JARY

		<u>[</u>	DETAILS OF	RACES	ENTE	RED							
DECLARATION:	I/we hereby a	pply to enter the race(s) i	ndicated below	and dec	lare that	the motorcycl	e I/we e	enter co	omplie	es in (every	detail	with
he regulations	and that the d	etails below are correct. T	he appropriate	entry fe	e is enclo	osed							
EACH DIFFE	RENT MACH	IINE NEEDS A SEPAR	ATE TRANSPO	ONDER									
RACE 1 – SI	NGLES <mark>CLAS</mark>	SIC RACE – 120cc to	250cc and 25	1cc to	350cc								
Make		Machine		сс	Year	2/4 Stroke	Trans	sponde	er Id	No			
Entrant Details	Name Ent. Licence No			Signature Tel No.									
				Terino.									
	LOOCC CLASS	IC RACE – 400cc to 1			1	a /a + 1	T						
Make		Machine		CC	Year	2/4 stroke	Trans	sponde	er Id	No	r	T	
Entrant	Name			Signatu	ire								
Details	Ent. Licenc	e No		Tel No.									
		RBIKE RACE - 230cc t	o 350cc 2 Str	oke an	d 600c	c 4 Stroke 4	Cylind	der &	7500	c 4 :	strok	e tw	ins &
<mark>Pre 1994</mark> 40	00cc 4 Strok	es											
Make		Machine		сс	Year	2/4 stroke	Trans	sponde	er Id	No			
Entrant	Name	·		Sign	ature								
Details	Ent. Licenc	e No		Tel N	lo.								
Frame No*				Engi	ne No.*								
THIS IS TO HEI	LP TO ENSURE	THAT YOUR MACHINE IS	ELIGIBLE FOR T	HIS RAC	E								
				<u> </u>	C ' 1			1					
		CLASSIC RACES – 300								e che	ck wit	h you	r
Make	nsure your ma	chine complies. The Club Machine			Year	2/4 Stroke	1						
маке		wachine		СС	Year	2/4 30000	Trans	sponde	er la	NO			1
	L			<u>.</u>									
Entrant	Name	••		Signatu									
Details	Ent. Licenc	e NO		Tel No.									
RACE 5 – SE	ENIOR CLAS	SIC RACE – 351cc to 5	500cc										
Make		Machine		сс	Year	2/4 stroke	-	ponde					

Make		Machine	сс	Year	2/4 stroke	Trans	pond	er Id	No		
Number of c	ylinders	Single [] Twin [] Four[]									
Entrant	Name		Signa	ture							
Details	s Ent. Licence No		Tel N	о.							

RACE 6 – LI	RACE 6 – LIGHTWEIGHT CLASSIC RACE – 175cc to 250cc + POST CLASSIC 125cc RACE									
Make Machine cc Year 2/4 stroke Transponder Id No										
Entrant	Name		Signatu	re						
Details	Ent. Licence	e No	Tel No.							

RACE 7 – JU	NIOR CLASS	IC RACE – 251cc to 350cc									
Make	ake Machine		СС	Year	2/4 stroke	Transponder Id No					
Number of	cylinders	Single [] Twin [] Four[]									
Entrant	Name		Signa	ature						 	
Details	Ent. Licence No		Tel N	lo.							

RACE 8 – SE	RACE 8 – SENIOR SUPERBIKE RACE - 601cc to 1300cc SUPERBIKE										
Make Machine		cc	Year	2/4 stroke	ke Transponder Id No						
Entrant	Name		Signa	ature							
Details	Ent. Licence	e No	Tel N	lo.							
Frame No.*		Engir									

*THIS IS TO HELP TO ENSURE THAT YOUR MACHINE IS ELIGIBLE FOR THIS RACE

Mutual Responsibility of Entrant and Rider :(As per the A.C.U. N.S.C.) An Entrant shall be responsible for all acts or omissions on the part of their riders, passengers, mechanics or any member of their entourage, but each of these shall be equally responsible for any infringement of the ACU National Sporting Code. The Club reserves the right to refuse any entry or forbid the use of any machine, which it considers inappropriate. All machines must be prepared to a high standard of cosmetic appearance.

ENTRY FEES: For ACU/SACU Licence holders the entry fee will include Third Party Insurance and Personal Accident Insurance of the Auto Cycle Union.

RACE ENTRY FEES		ACU/SACU		1	MCUI/FMN
FOR 1 ST SOLO RACE ENTERED		£190-00		 	£90-00
FOR EACH OTHER SOLO RACE multiples of	£60-00		No x	£40-00	=
See below	100-00			140-00	
FOR TWO SIDECAR RACES ENTERED		£280-00			£150-00
Transponder Hire if required £50 Each				1	
Newcomer Jacket if required	£8-00			1	
2024 Club Membership (if required)	£15-00				
If already a Member please tick box					
Total - Paid Via Bank Transfer or PayPal – please specify method of payment	Total				

The Entry Fee for the 1st Race for Solos is £190-00 and a further £**60** for each additional race entered – e.g. An ACU rider enters Singles, Senior and Junior it would be £190 plus £120 for two additional races making £310-00 in total – The Sidecars will pay £280, which covers both races.

Check: PLEASE INDICATE WHICH SOLO EVENTS YOU HAVE ENTERED TO ENSURE IT CORRESPONDS WITH THE ENTRY FEE

RACE 1	RACE 2	RACE 3	RACE 5	RACE 6	RACE 7	RACE 8
SINGLES	1100cc	JUNIOR	SENIOR	LIGHTWEIGHT	JUNIOR	SENIOR SUPERBIKE
CLASSIC	CLASSIC	SUPERBIKE	CLASSIC	CLASSIC + 125cc POST	CLASSIC	
				CLASSIC		

DUE TO THE SIGNIFICANT INCREASE IN BANK CHARGES, WE ARE NO LONGER PAYING OUT CHEQUES TO THE WINNERS INSTEAD YOUR MONEY WILL BE FORWARDED DIRECTLY INTO YOUR BANK ACCOUNT. PLEASE ENSURE THAT YOU FILL IN YOUR BANK DETAILS ON PAGE 4 OF THE ENTRY FORM SO THAT WE CAN PAY OUT YOUR PRIZE MONEY Bank Transfer Account: SOUTHERN ONE HUNDRED MCR Ltd Account No. 19386206 Sort Code: 55-91-04 or PayPal to entries@southern100.com Please ensure you Quote your Name as Reference on ALL payments. ENTRIES CLOSE ON 29th FEBRUARY 2024

This Entry Form, when completed, should be sent to the Race Secretary: George Peach, Ellerslie, 128 Malew Street, Castletown, Isle of Man IM9 1LT Any queries regarding the Entry Fees please contact George, Tel 01624 822546, Mobile 07624 471301 email: <u>entries@southern100.com</u>

ENTRY DECLARATION: I the undersigned apply to enter the event described above and in consideration thereof: -

- 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 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.
- 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 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 consent to the collection and retention of my personal information by the ACU and the Southern 100 Motorcycle Racing Ltd.
- I confirm that the machine(s) as described on page 2 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 on page 2 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 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 Licence, not had an ACU Licence suspended, nor have I been excluded from any ACU Competition.
- 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 accept that this entry, if accepted, will form a contract between the Club and myself, which will be governed in all respects in accordance with Isle of Man Law. I/we irrevocably submit to the jurisdiction on the Isle of Man Courts in respect of any legal action or proceedings arising out of the contract or my participation in the meeting.

ACKNOWLEDGEMENT OF THE RISKS OF MOTORSPORT: I understand that by taking part in this event I am exposed to a risk of death, becoming permanently disabled or suffering some other serious injury and I acknowledge that even in the event that negligence on the part of the ACU, any event organiser, any circuit owner, 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 may suffer, the dominant cause of any serious injury will always be my voluntary decision to take part in a high risk activity.

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's signature:	Passenger	's signature:	

Entrant's Signature _____

Vehicle Details: This is to allow access to the Paddock

Vehicle Registration Number: _____

Vehicle/Van Make, Model & Colour ______ Size of Vehicle to include Awning in Metres – Length: ______ Width:

Registered Club Member (if any)

n.b. Paddock space is very limited. Each competitor will be allocated a 10m x 10m space for 2 machines, and each additional two machines you will be allocated an extra 10m x 10m space. Should you require further space please get in touch with details

Newcomers:

Please submit a comprehensive set of results from your last three previous meetings, showing the full finishing order of the races entered. This will help the Race Sub Committee consider your entry.

Non-Newcomers:

Please provide details of any previous experience of the Billown Circuit plus your					
Fastest Lap time and Machine it wa	is achieved on:				
Lap Time	On Machine and cc	In Year			

All – Please complete the below table to show details of your racing experience and recent successes, over the last three years

DATE	<u>CIRCUIT</u>	STATUS – Club/Nat/Int.	POSITION

IMPORTANT PLEASE COMPLETE YOUR BANK DETAILS BELOW

Account No. _____ Sort Code __-__ Account Name _____ This will be used to issue refunds/prize money etc. Please ensure the details are correct Please ensure that you give your name as reference PayPal use entries@southern100.com PREFERRED RACING NUMBER

If you have a preferred racing number below 100 please enter it in the box below. Please note we will endeavour to help; however, we cannot guarantee that you will receive the number requested. **Please Note you will be the same number for each machine**

First Choice	Second Choice
Number	Number

Please ensure you have completed all **5** pages of this entry form and return to George Peach, Ellerslie House, 128 Malew St, Castletown, Isle of Man, IM9 1LT no later than 29th February 2024. Ensure payment has been sent by Bank Transfer along with your Name or it accompanies this entry. Only completed entries, will be considered.



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General Data Protection Regulations (GDPR) Consent Form

Rider/Driver Full Name ____

How the Southern 100 Motorcycle Racing Limited use your information

The Southern 100 Motorcycle Racing Ltd, will process your confidential information – which includes your Names, Address, all contact details, Date of Birth, relevant medical history, Licence No., Next of Kin details and Media Consent only for the purposes listed below. The data is stored securely, no longer than necessary and solely for the completion of those business activities.

I confirm that I agree to the Southern 100 Motorcycle Racing Ltd using my data in the following way.

Please tick the box

- For administration including press releases in connection to Southern 100 Motorcycle Racing Ltd []
- Supply personal information to Medical Personnel and Club's Welfare Officer if required
- To add you to the mailing list for events held on the Billown Circuit
- Use of photographs of you for our website, social media platforms and publicity for the Club []

To ensure the confidentiality of data and compliance with the General Data Protection Regulation any third parties contracted by the Southern 100 Motorcycle Racing Ltd., are under a strict data protection agreement. The Southern 100 Motorcycle Racing Ltd will not publish or share your confidential data with any other third parties than herein mentioned.

SIGNED ______

General Data Protection Regulations (GDPR) Consent Form

Passenger Full Name _____

How the Southern 100 Motorcycle Racing Limited use your information

The Southern 100 Motorcycle Racing Ltd, will process your confidential information – which includes your Names, Address, all contact details, Date of Birth, relevant medical history, Licence No., Next of Kin details and Media Consent only for the purposes listed below. The data is stored securely, no longer than necessary and solely for the completion of those business activities.

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SIGNED ___

Should you require any further information, queries or complaints please contact our GDPR Data Officer Mrs. Rachel Palmer on email address: secretary@southern100.com
