



Motorcycling Western Australia  
 PO Box 475, Maylands, WA, 6931  
 Tel: 08 9371 5333 Fax: 08 9371 5311



## Motorcycling Western Australia Officials Re-accreditation Application

Refer to the MWA Website > Officials > Re-accreditation conditions

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Club: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Phone (h): \_\_\_\_\_ Phone (w): \_\_\_\_\_

Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Expiry of Accreditation: \_\_\_\_/\_\_\_\_/\_\_\_\_ Official's Licence Number: \_\_\_\_\_

### Declaration

I confirm that the details contained in this application are true and accurate to the best of my knowledge. I undertake if registered, to submit and be bound by the General Competition Rules of Motorcycling Australia and any regulations, supplementary regulations, or final instructions as may from time to time be imposed or approved by Motorcycling Australia or Motorcycling WA.

I have –

- Completed and signed the attached Indemnity Form, AND
- completed the attached document with evidence of my activity showing proof of being involved in 6 events over the past 4 years (min of 1 event per year), where I have acted in the specific role required for accreditation at the appropriate level or higher events OR
- attached a photocopy of my Participation Journal as proof of my activity as an Official over the last four (4) years, OR
- attached my original Participation Journal as proof of my activity as an Official over the last four (4) years. (This will be returned)

Signed: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

This licence includes Capital Benefits insurance which incorporates a weekly benefit for loss of earnings if you are injured during the course of your duties at a "Permitted Event" conducted within Australia. The policy does not cover medical or ambulance expenses. **Please ensure you understand, complete and sign the Indemnity overleaf.**

# **MOTORCYCLING WESTERN AUSTRALIA INDEMNITY FORM**

**WARNING! THIS IS AN IMPORTANT DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS AND OBLIGATIONS.  
READ IT CAREFULLY AND DO NOT SIGN IT UNLESS YOU ARE SATISFIED THAT YOU UNDERSTAND IT.  
THIS IS A CONTRACT TO PARTICIPATE IN A MA OR MWA EVENT AND / OR ACTIVITY.**

**PLEASE PRINT**

1) I, \_\_\_\_\_ (OFFICIAL)

HEREBY AGREE: with the person, organisations and bodies corporate whose names appear in schedule 1 (hereinafter collectively called 'the organiser') that I am by this agreement entitled to participate in the items and conditions set out in this document, the Championship Regulations and the Supplementary Regulations.

2) **ACKNOWLEDGEMENT OF THE RISKS, DANGERS AND OBLIGATION.**

**I ACKNOWLEDGE** that motorcycle sport is dangerous and that by engaging in the sport and participation in the meeting I take, and am exposed to certain risks and dangers and am under certain obligations as follows:

- (a) That I may be injured, physically or mentally and may be killed.
- (b) That my machinery or equipment may be damaged, lost or destroyed.
- (c) That other competitors may ride dangerously or with lack of skill.
- (d) That track or event conditions may be hazardous and may vary without warning or predictability.
- (e) That organisers, officials, land owners and any agents or representatives of those in charge of the meeting are frequently obliged to make decisions under pressure of time and/of events.
- (f) That any policies of insurance of or in respect of my life or physical or mental health may be voided.
- (g) That there may be no or inadequate facilities for treatment or transport of me if I am injured.
- (h) That I have an obligation to myself and to others to compete safely and within the rules of competition.

3) **INDEMNITY GIVEN TO ORGANISERS.**

**IN CONSIDERATION** OF THE ACCEPTANCE OF MY APPLICATION FOR A LICENCE, I IRREVOCABLY AGREE TO INDEMNIFY the organisers and each of them in the following manner:

- (a) That I participate in the meeting at my sole risk and responsibility.
- (b) That I accept the venue as it stands with all or any defects hidden or exposed.
- (c) That I indemnify and hold harmless the organisers, their respective servants, agents or officials against any actions or claims which may be made by me or on my behalf or by other parties for or in respect of or arising out of my death or injury, loss or damage caused to me or to my machinery or equipment whether caused by negligence, breach of contract or in any other manner whatsoever.

**SCHEDULE 1.**

- 1. Federation Internationale Motorcycliste.
- 2. Motorcycling Australia Limited.
- 3. Motorcycling Western Australia (Inc).

**I HAVE READ THE 2013 MANUAL OF MOTORCYCLE SPORT, ANY SUPPLEMENTARY REGULATIONS AND INDEMNITY FORMS, AND AGREE TO BE BOUND BY THEM INCLUDING THAT I / WE INDEMNIFY ALL THOSE MENTIONED IN SCHEDULE 1.  
THIS DOCUMENT IS TO BIND MY GUARDIANS, ATTORNEYS, SUCCESSORS AND EXECUTORS.**

OFFICIAL'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Office use only.**

Date .....
Licence Number .....
Current Accreditation Level .....
Authorised by .....
Accreditation Level Awarded                      L1                      L2                      L3                      L4
Expiry Date .....

