**PERMIT APPLICATION TO CONDUCT A COACHING SCHOOL**

Office Use:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Club or Promoter:** |  | | | | | | | | | **Contact Name:** | | | |  | | | | | |
| **Postal Address:** |  | | | | | | | | | **Contact Number:** | | | |  | | | | | |
|  |  | | | | | | | | | **First Aid:** | | | |  | | | | | |
| **Email:** |  | | | | | | | | | | | | | | | | | | |
| **School Name:** |  | | | | | | | | | **Date of School:** | | | |  | | | | | |
| **Venue/Track Name:** |  | | | | | | | | | **Fee: $** | | | |  | | | | | |
| **• Level 1 Coach is permitted to coach 6 riders.**  **• Level 2 Coach is permitted to coach 15 riders. Permitted an additional 10 riders for every Level 1 present.**  **Max 25 participants.** | | | | | | | | | | | | | | | | | | | |
| **Coaches:** | | | | | | | | | | | | | | | | | | | |
|  | | | | **Lic #** | |  | | |  | | | | | | **Lic #** | | |  | |
|  | | | | **Lic #** | |  | | |  | | | | | | **Lic #** | | |  | |
| **• *Coaches listed above must be present for the entire meeting. Motorcycling NSW must be immediately notified in writing of any changes.*** | | | | | | | | | | | | | | | | | | | |
| **Day Only** | | | | | **Night Only** | | | | | | | | **Day/Night** | | | | | | |
| Motocross  Supercross  Stadium Motocross  Grass Track Motocross  Classic Motocross | | | Dirt Track  Short Track  Long Track  Speedway  Grass Track Dirt Track  Classic Dirt Track | | | | Enduro  Cross Country  Pony Express  Sprint | | | | | Minikhana  Minicross  Mini Enduro  Mini Trials | | | | Road Race  Historic Road Race  Moto-Trials  Super track  Supermoto | | | |
| Mini (4-U7)  Junior(7-U16)  Senior (16+) | | | Senior Quads (16+)  Junior Quads (ACT Only) | | | | *The following activities will be conducted by the Club/Promoter during the event and application to have these activities covered by the Motorcycling Australia Public Liability Policy is applied for:* | | | | | | | | | Licence Testing  Canteen/Sale of Food  Car Park Facility | | | |
| ***The decision to cover such events is at the discretion of the Management of Motorcycling NSW Limited. It is at the Promoter’s discretion and highly recommended that insurance cover is in place for activities not covered by MA insurance policy.*** | | | | | | | | | | | | | | | | | | | |
| I wish to apply for approval to conduct the above-described meeting and hereby agree to abide by the General Competition Rules of Motorcycling Australia Limited and the By-Laws of Motorcycling NSW Limited. This application is made with the approval of the landowner and/or any authority controlling the use of the course or track. I understand and hereby accept that the promoter is responsible for paying the excess on any public liability insurance claims arising out of this meeting. | | | | | | | | | | | | | | | | | | | |
| **APPLICANTS NAME:** | |  | | | | | | **SIGNATURE:** | | |  | | | | | | **DATE:** | |  |
|  | | | | | | | | | | | | | | | | | | | |
| **All applications, FULLY COMPLETED must be received in the Motorcycling NSW Office no later than TWO WEEKS prior to the event.** | | | | | | | | | | | | | | | | | | | |

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| **Cheque number:** | |  | | **Money Order number** | | | |  | | |
| **Credit Card** | | **VISA** | **MASTERCARD** | **Expiry Date** | | **/** | | | **Security Code**  **3 digits on back of card** |  |
| /                         /                         / | | | | | | | | | | |
| **Account Name** |  | | | | **Signature** | |  | | | |

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| **Checklist** | |
| Correct Fee  Track Usage Deed *(if applicable)* | Signed Landholders permission attached *(If applicable)*  Mini Deed of Agreement *(if applicable)* |
| **This application WILL NOT be processed until all required information has been received, including payment.** | |