

## Queensland Raceways MORE THAN RACING

## Application for a Lakeside Bicycle Licence



I want to ride a Bicycle on Lakeside Park.			Licence No.
First Name:	Name: Last Name:		Birth date:
Postal Address:	To	Town:	
Email address:	Mobile Phone:	Home Phone:	Work Phone:
bicycle in competition and test sessions connection with an authorised Activity o	ly to Queensland Raceways Operations Pty conducted by the Track Operator and also r Performance Testing. I certify that all infor ch could affect my ability to continue to und	for the purpose of taking part as an off mation on this form is correct and will a	ficial, spectator, crew or mechanic in
to terminate my participation in any A	d racing a bicycle can be dangerous and th ctivity or Performance Testing at any time all the inherent risks and danger in competi	e for whatever reason its sees fit at	the time. I declare that I have read and
Exclusion of Liability I agree to absolve the Track Operator for a QRO sanctioned venue or in a QRO p	om all liability however arising from injury of ermitted event.	or damage however caused (whether f	atal or otherwise) arising out of my use o
demands, losses, damages, costs, per (including negligence) on the part of the Should any incident occur as a result of	my participation in an Activity and/or Perfo mium or deductible is charged by the insu	directly or indirectly, of my use or mi rmance Testing whereby a successful	suse of the Track or any act or omission claim is made under any insurance policy
undertake. By using of the Track I indic	nspected the Track and found it to be in sate acceptance of the Track's condition for ces the safety of the Track I will immediate	the Activity and/or Performance Testin	ng I will undertake. If an act or occurrence
I have read, understand, acknowledge the likelihood of injury and damage inhe	and agree to the above warnings, exclusio rent in any testing activity.	n of liability, indemnity and inspected	the Track and accept with full knowledge
	Applicants Signature:		Date: / /
CONSENT STATEMENT FOR APPLIC	ANTS WHO ARE MINORS		
document and consent to them particip the Track Operator shall NOT be under	being ating in the Activity and/or Testing. In doing any liability whatsoever for any death or be injury, loss or damage is caused by any ne	so I acknowledge that the Activity an odily injury, loss or damage which may	d/or Testing is dangerous, and agree that
Signature of Parent/Guardian:(Delete whichever does not apply)		Date://	