

SKEGNESS RACEWAY LTD

2022 DRIVERS LICENCE APPLICATION FORM

Please post to the address on page 2 not the stadium

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Tick appropriate formula(s)	Licence Fee	Official use:
National Banger	£60 before 31/12/21	Payment:
	£75 from 01/01/22	-
Rookie Banger	£45 before 31/12/21 £55 from 01/01/22	
1300 Saloon	£60 before 31/12/21	Number of photos:
	£75 from 01/01/22	
GT Hotrod	£55 before 31/12/21	
	£65 from 01/01/22 £15 race fee per meeting	Proof of age if required:
Junior Rod	£40 before 31/12/21	-
303	£45 from 01/01/22	
Junior Banger	£40 before 31/12/21	-
	£45 from 01/01/22	Date of Issue:
Lady Rookie Banger	£35 before 31/12/21	Date of issue.
Add on Licence	£45 from 01/01/22	
Add on Licence	£30 per formula	
		Date of birth
		.Post Code
		ess
Please remember and send t	he required numbers of passpo	ort size photos.
2 are require for 1 licence, m	ore if you are racing more than	1 formula
First time Junior drivers must also	send a Birth Certificate & complete	e a written and driving test,
	nd must be pre booked via the offic	<u> </u>
All formulas excluding Adult Bangers mu	•	oons must also be fitted with Transponders



Please answer Yes or No.

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MEDICAL QUESTIONAIRE - MUST BE COMPLETED

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I hereby warrant the following answers are true and each warranty is repeated and continues to be true throughout the term of this agreement in respect of my medical condition in respect of my medical condition.

1. Do you suffer epilepsy or sudden attacks of disabling giddiness or fainting?..... 2. Are you suffering from any defect in movement or muscular power?..... 3. Are you suffering from any disease, medical condition, mental or physical, or disability which may cause the driving by you in a competition car to be a source of danger to yourself or others on the track or on the Stadium property? 4. Do you suffer from any back or neck problems which have caused you to visit a Doctor in the last 12 5. Have you suffered any race injuries which have resulted in you receiving hospital treatment in the last 5 years? If so please give full details on a separate sheet. If the answer is YES to any of the above medical questions. A DOCTORS LETTER WILL BE REQUIRIED prior to a racing license being issued. I declare to the best of my knowledge & belief that the information I have supplied is correct To be completed by Parent /Guardian of applicants under 18yrs of age. Signed...... Date....... Name......Parent/Guardian..... Address.....Postcode..... Cheques should be payable to Skegness Raceway Ltd. Card payment can also be made Name on card......signed.....signed..... Card Number...... Security Code...... Security Code......

Please ensure you have filled in all the info and sent enough passpost size photos and the correct payment.

Please post to: (DON'T SEND TO THE STADIUM)
Skegness Raceway Licencing, Vogrie Croft, Newlandrig, Gorebridge, Midlothian, EH23 4PA

www.skegway.info Tel: 07881 021058 email: info@skegway.info