

**West Leeds Motor Club Ltd.**  
(Affiliated to Yorkshire Centre ACU)  
**The White Rose Trial**

Date: Sunday 11th September 2011.

Permit Number: ACU 32746



**ANNOUNCEMENT:** The West Leeds Motor Club Ltd. will promote a Open Trial for solo motorcycles on Sunday 11<sup>th</sup> September 2011; with classes for Adults with White Rose Trophy, 50/50 & Clubman's routes. (Dual sections for Clubman's and a 50/50 class for riders wishing to ride a mix of hard and easy sections).

**JURISDICTION:** The event will be run under the National Sporting Code, Standing Regulations of the ACU and the following Supplementary Regulations and any final instructions issued for the meeting.

**ELIGIBILITY:** Open to all members of ACU Affiliated Clubs. All riders must hold a current ACU Registration Card or SACU Licence. All other riders must produce a licence and start permission confirming insurance from their Federation.

**MACHINES:** Motorcycles as per NSC Appendix D Category 1, Group A1 Solos and TSR 8.

**START/VENUE:** Start 10am at CAM HEAD, NR. HAWES. (A684 through Gayle). NORTH YORKSHIRE. Long/Lat: 54.2427/-2.2678. First two riders will start at 10.01 and then in pairs at one minute intervals. Clubman riders will start first followed by 50/50 riders and White Rose riders last.  
Rider numbers and start times will be posted on web site and to riders supplying an SAE for that purpose.

**OFFICIALS:**

Yorkshire Centre Steward:	Mr. Julian Ford. (Licence No.30295)
Club Steward:	Mrs. Penny Ludgate
Clerk of the Course:	Mr. Nigel Crowther (Licence No. 80978)
Asst. Clerks of the Course:	Mr. Howard Gulle: Mr. Mark Chippendale
Starter/Timekeeper:	Mrs. Marylyn Pitts.
Machine Examiner.:	Mr. Steve Arnall
Secretary of the Meeting:	Mr. Peter Walton, 36 Hathaway Drive, Leeds LS14 2DJ Tel:0113 2932943
Assistant Secretary:	Mrs. Penny Ludgate Tel: 01977 648046
Point of contact for child protection issues,	Mrs. Penny Ludgate

**ENTRIES:** Must be on the correct form and sent to the Secretary of the Meeting together with the correct entry fee of £25.00 by closing date of 4<sup>th</sup> September 2011. **No late or telephone entries will be accepted.** Numbers will be allocated in reverse order of receipt, (early entry = late number) in 3 groups, Clubman riders, 50/50 riders, and White Rose riders.  
Results and notification of rider numbers will be published on Club website. [www.westleeds.co.uk](http://www.westleeds.co.uk).  
If you require a hard copy of these; enclose an SAE with envelope marked indicating purpose.  
Entry Fees will only be returned if the Trial is cancelled or postponed for more than 24 hours.  
**Please make cheques payable to WEST LEEDS MOTOR CLUB LTD**

**AWARDS:**

BEST PERFORMANCE	WHITE ROSE TROPHY* & REPLICA.
2 <sup>ND</sup> .	DANCASTER ROSE BOWL* & REPLICA
3 <sup>RD</sup>	STEVENS TROPHY* & REPLICA
BEST 50/50 RIDER	CHRIS LUDGATE MEMORIAL TROPHY*
BEST CLUBMAN RIDER	RUSS LINE TROPHY*
BEST FEMALE RIDER	TOP BIRD TROPHY*
1 <sup>st</sup> CLASS AWARDS TO FIRST 10% of FINISHERS IN EACH CLASS.	
NO RIDER TO WIN MORE THAN ONE AWARD. * Trophies to be held for 1 year only.	

**COURSE:** The course will consist of one lap and 40 sections in and around Hawes accessed by public highway. **One event RTA insurance will be available on the day.**  
The Time limit for the event will be allocated with your start time. Time penalties will be incurred 1 mark per minute up to a maximum of 20 minutes for late starting and late finishing and thereafter will be excluded.  
A part of the course will be passing by a Red Squirrel Conservation area at grid ref SD827 872 for approx 1 mile. There will be signs warning of this area. Please ride with extreme care at this point as there may also be young children about.

**METHOD OF MARKING:** As per TSR22a; stop permitted. Ties will be resolved as per TSR23.

**PROTESTS:** As per the National Sporting Code of the ACU section10.04.

**GENERAL:** Two Cans of Petrol will be necessary. Fill up after first leg at car park. A petrol stop area will be signed at which you may deposit one can of petrol; the course will pass this area. (There will be NO transport of fuel around the course). Refreshments at start.

**This year the trial is being run under an open permit, whilst not a national event it is open to all riders regardless of centre or status. The trial will be in the same format as in previous years.**

**NOTE The machine which is entered and competed on must be suitable and proper for it's purpose, shall be insured as required by the Road Traffic Act or equivalent legislation, and that it will comply with the regulations in respect thereof. All machines must display a number plate.**

**MOTORCYCLE SPORT EVENT ENTRY FORM FOR ACU OFF ROAD EVENT**  
Auto Cycle Union Ltd. ACU House, Wood Street, Rugby, Warwickshire. CV21 2YX.

**WEST LEEDS MOTOR CLUB LTD.**

**The White Rose Trial**

DATE: 11<sup>th</sup> September 2011. PERMIT N<sup>o</sup>: ACU 32746

Venue: Cam Head Nr. Hawes North Yorkshire. Long/Lat: 54.2427/2.2678.

*This event is held under the National Sporting Code of the Auto-Cycle Union, the Standing Regulations, Supplementary Regulations and any Final Instructions issued for the meeting.*

*The ACU National Sporting Code and Standing Regulations are published annually in the ACU Handbook.*

**Entry declaration:** I / we the undersigned apply to enter the event described above and in consideration thereof: -

- I / we hereby declare that I / we have had the opportunity to read, and that I / we 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 / we further declare that I am / we are physically and mentally fit to take part in the event and I am / we are competent to do so.
  - I / we confirm that I / we understand the nature and type of event we are 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 / we confirm that the machine(s) as described below which I / we compete on shall be suitable and proper for the purpose.
  - I / we confirm that I/we are eligible to compete on the machines for which I/we have entered.
  - I / we confirm that if any part of the event takes place on a public highway, the machine(s) described below shall be insured as required by the Road Traffic Acts, or equivalent legislation, and that it / they will comply with the regulations in respect thereof.
  - I / we agree that I am / we are required to register our arrival by "signing on" at the designated place prior to commencement of my/our practice or first competition, whichever occurs first.
  - I / we confirm that I/we are not suspended or my/our ACU Licence has not been suspended / withdrawn from any ACU competition.
- I / we enclose the entry fee of: **£25:00**

**Acknowledgement of the risks of motorsport:** I / we understand that by taking part in this event I / we are exposed to a risk of death, becoming permanently disabled or suffering some other serious injury and I / we acknowledge that even in the event that negligence on the part of the ACU, 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 / we may suffer, the dominant cause of any serious injury will always be my / our voluntary decision to take part in a high risk activity.

I / we have read the above and acknowledge that my / our participation in motorsport is entirely at my / our own risk.

Rider's signature: ..... If **under 18** state date of birth\*: .....

\* For riders and passengers **under 18** years of age - I accept the above conditions of entry to this event and give my approval:-

Signature of parent or person with parental responsibility:.....

*Riders and Passengers under 18 years of age who cannot produce a valid ACU Competition Licence/Trials Registration must also complete a 'Parental Agreement form (Single Event)' in addition to this entry form.*

Please complete all details below legibly using BLOCK CAPITALS

**FULL NAME:** ..... **DATE OF BIRTH:** .....

**ADDRESS:**.....

.....**POST CODE:** .....

**TEL CONTACT NUMBER (s):** ..... **EMAIL:**.....

**CLUB REGISTERED MEMBER OF:** ..... **ACU MEMBER NUMBER:** .....

**CLASS ENTERED:** White Rose Course:  50/50 Course:  Clubman Course:  (Please tick)

**MACHINE MAKE AND MODEL:** ..... **CAPACITY:** ..... **c.c.**

Please send a self-addressed DL envelope if you require hard copy of results, otherwise they will be published on Club

website [www.westleeds.co.uk](http://www.westleeds.co.uk) If you can provide an observer please give name and contact details:

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