

RECEIVED STAMP HERE  
(OFFICE USE ONLY)

Use this form to apply for the following licences:

**Circuit Licences** PCC, CC, PC, NC  
**Off Road Licences** NOJ, NO, NON, NONJ, CO, COJ, CON, CONJ  
**Rally Licences** NRNJ, NRJ, CRN, CR, NRN, NR  
**Superkart Licences** PSKJ, PSK, NSKJ, NSK

**Please note this form must be submitted to:** Member Services, PO Box 172, Canterbury VIC 3126, or emailed to memberservices@motorsport.org.au

Please ensure all sections are completed and signed where indicated.

All licences are valid for Speed/Non Speed activity.

MEMBER NUMBER (ID)

TYPE OF LICENCE APPLIED FOR

## Details

SURNAME

GIVEN NAMES

DATE OF BIRTH

—

—

GENDER

ADDRESS

SUBURB

STATE

POSTCODE

EMAIL

MOBILE

PHONE

EMERGENCY CONTACT NAME (1)

EMERGENCY CONTACT NUMBER (1)

EMERGENCY CONTACT NAME (2)

EMERGENCY CONTACT NUMBER (2)

**COMPULSORY**

Please attach a passport size photo here

(if not previously supplied)

DO YOU HAVE AN AUSTRALIAN CITIZENSHIP OR PERMANENT RESIDENCY?

YES

NO

**IF 'NO' NATIONALITY OF PASSPORT**

*If 'NO', you are required to provide documentary evidence of your Australian Status. This can include: Appropriate section of your passport, utility bill showing your residential address, or a statutory declaration indicating that you are a resident of Australia.*

## Motorsport Australia Affiliated Club Membership

Please list the Motorsport Australia-affiliated club(s) of which you are a member (no abbreviations).

**Note: It is compulsory for all driver licence holders to be a member of a Motorsport Australia-affiliated sporting car club.**

FULL NAME OF CLUB (1)

STATE

FULL NAME OF CLUB (2)

STATE

**OFFICE USE ONLY**

MEMBER NUMBER

DATE

—

—

RECEIPT NO.

AMOUNT \$

## Pre Licence Conditions

### CIRCUIT

All Circuit Licence applicants must complete the online Circuit Racing Lecture (emailed by Member Services upon receipt of application).

In addition to the Circuit Racing Lecture, applicants must also complete an Observed Licence Test.

An Observed Licence Test is not required if the applicant:

- Has completed at least five Motorsport Australia Supersprint or Regularity events, or two Motorsport Australia Tarmac Rally events in the previous 24 month period. Copies of the results must be included with your application.
- Holds a current AKA B grade licence or higher. A copy of this licence must be included with your application.

### SUPERKART

All Superkart Licence applicants must be complete the online Circuit Racing Lecture (emailed by Member Services upon receipt of application).

In addition to the Circuit Racing Lecture, applicants must also complete an Observed Licence Test.

An Observed Licence Test is not required if the applicant:

- Holds a current AKA B grade licence or higher. A copy of this licence must be included with your application.

### RALLY

All Rally Licence applicants must complete the online Rally Licence Lecture (emailed by Member Services upon receipt of application).

In addition to the Rally Licence Lecture, applicants must also complete an Observed Licence Test.

Applicants over the age of 25 will not be required to complete an OLT if they have held a civil drivers licence for five years or more.

Proof of this is to be provided with the application (a photocopy of the licence card will be accepted).

Rally Navigators are not required to complete the OLT, and their licence will be issued upon completion of the Rally Licence Lecture.

### OFF ROAD

All Off Road Licence applicants must complete the online Off Road Licence Lecture (emailed by Member Services upon receipt of application).

In addition to the Off Road Licence Lecture, applicants must also complete an Observed Licence Test which can be completed at your first event.

Off Road Navigators are not required to complete the OLT, and their licence will be issued upon completion of the Off Road Licence Lecture.

## AIMSS

### AIMSS Contribution

If you **do not** wish to make a \$10.00 contribution to AIMSS, please tick the box, and reduce your Grand Total by \$10.

Please note, a \$10 AIMSS Contribution is included in adult licence fee (not applicable to junior licences).

*The Australian Institute of Motor Sport Safety is a national not-for-profit organisation founded by Motorsport Australia, which is committed to improving safety in motorsport at all levels in Australia. Visit [aimss.com.au](http://aimss.com.au) for more information.*

## Licence Selection

### CIRCUIT

NC National Circuit (17):	\$524
PC Provisional Circuit (16):	\$524
CC Clubman Circuit (16):	\$336
PCC Provisional Clubman Circuit (16):	\$336

### SUPERKART

NSK National Superkart (16):	\$412
NSKJ National Superkart Junior (12):	\$163
PSK Provisional Superkart (16):	\$412
PSKJ Provisional Superkart Junior (12):	\$163

### RALLY

NR National Rally (16):	\$270
NRN National Rally Navigator (16):	\$270
CR Clubman Rally (16):	\$198
CRN Clubman Rally Navigator (16):	\$198
NRJ National Rally Junior (14):	\$70
NRNJ National Rally Junior Navigator (14):	\$70

### OFF ROAD

NO National Off Road (16):	\$249
NOJ National Off Road Junior (14):	\$70
NON National Off Road Navigator (16):	\$249
NONJ National Off Road Navigator Junior (12):	\$70
CO Clubman Off Road (16):	\$150
COJ Clubman Off Road Junior (14):	\$35
CON Clubman Off Road Navigator (16):	\$150
CONJ Clubman Off Road Navigator Junior (12):	\$35

**\*Please note:** Clubman licences are valid up to and including State Level events.  
National licences are valid up to and including National Level events.

## Additional Options

### Motorsport Australia Manual: \$5

The Manual is available at [motorsport.org.au](http://motorsport.org.au)  
If you require a printed copy, select this option and add \$5 to the Grand Total.

### Passbook

Select this option if you require a new competitor pass book.

### Motorsport Australia Official

Tick if you would like to become a Motorsport Australia Official (there is no cost to become an Official).

## Fee Options

### Urgent Fee: \$90

If you require your licence within 5 working days of being received by Member Services please add \$90 to the Grand Total (not applicable to junior licences).

### GRAND TOTAL: \$

**NOTE: IF YOU ARE APPLYING FOR MORE THAN ONE LICENCE TYPE, PLEASE ENTER THE VALUE OF MOST EXPENSIVE LICENCE ONLY**

## Fit and Proper Person

I acknowledge and agree that it is a fundamental condition of issue of this licence and its continuing validity that I:

- 1) have advised Motorsport Australia in writing of any act, omission, fact or circumstance which may affect my ability to be and remain a fit and proper person to hold this licence and exercise the duties and privileges that relate to it;
- 2) have advised Motorsport Australia in writing if I have been found guilty of or charged with any:
  - a) serious indictable criminal offence; or
  - b) sexual offence,  
(unless this is a 'spent' or 'annulled'<sup>1</sup> conviction); and
- 3) undertake to advise Motorsport Australia immediately in writing upon any court of competent jurisdiction making any such finding, or upon being charged with any such offence.

I acknowledge and agree that Motorsport Australia may, in its absolute discretion (subject to this clause) refuse to issue, suspend or withdraw this licence at any time should Motorsport Australia reasonably form the view that I may not be, or am not, a fit and proper person to be granted or hold this licence and/or exercise any of the duties and/or privileges that arise from, or relate, to it, however I understand that before a licence is refused, suspended or withdrawn by Motorsport Australia I will be afforded the opportunity to address the Motorsport Australia Board in writing on the proposed refusal, suspension or withdrawal.

<sup>1</sup> As determined by the Crimes Act 1914 (Cth), Criminal Records Act 1991 (NSW), Criminal Law (Rehabilitation of Offenders) Act 1986 (Qld), Spent Convictions Act 2000 (ACT), Criminal Records (Spent Convictions) Act 1992 (NT), Spent Convictions Act 1988 (WA) and/or the Annulled Convictions Act 2003 (Tas) (including their successors and replacements.)

## Health Statement (must be completed by all applicants)

Please tick if you have any significant or recurrent problems with the following:

**ANXIETY/DEPRESSION OR OTHER MENTAL HEALTH CONDITION**

**DIABETES**

**EPILEPSY**

**FITS/FAINTING/DIZZINESS**

**HEADACHES/MIGRAINE/HEAD INJURY**

**HEART DISEASE**

**If you have ticked any of the above, you ARE required to provide additional information relating to your condition.** For more information go to: [motorsport.org.au](http://motorsport.org.au) or contact Member Services on 1300 883 959

Please tick if you are affected by any of the following conditions

**DO YOU SUFFER FROM ANY ALLERGIES?**

**HEARING LOSS OR DEAFNESS**

**DO YOU WEAR GLASSES OR CONTACT LENSES WHEN DRIVING?**

If you have ticked any of the above, you are **NOT** required to provide information relating to these conditions and can continue with your application.

**IS THERE ANY OTHER RELEVANT MEDICAL INFORMATION THAT YOU WISH TO ADVISE?**

Motorsport Australia may request further information from you or your doctor before accepting your application for a licence. Depending on your medical history or status, Motorsport Australia may not be able to issue you with a licence.

**PLEASE SIGN IF THE ABOVE INFORMATION IS CORRECT**

SIGN HERE

**NOTE: All Circuit & Superkart Licence applicants must complete the Motorsport Australia Medical Examination. Please find the Motorsport Australia Medical Record at the back of this application form.**



Interested in a quote? Please select the insurance you are looking for



Daily



Special



Track Cover



Multiple Car Policy

How would you like Famous to get in touch?

Please call me

I'd prefer an email



famousinsurance.com.au



1300 326 687

## Payment

Paying by (please tick appropriate box)

Cash (ONLY if paying in person at a Motorsport Australia Office)

Cheque/Money Order (made payable to "Motorsport Australia")

Credit Card (please complete details)

CARD NUMBER

EXPIRY

/

CVV

CARD TYPE

VISA

MASTERCARD

NAME ON CARD

SIGNED

SIGN HERE

## Declaration (must be completed by all applicants)

### ANY APPLICANT MAKING A FALSE DECLARATION IS LIABLE TO REFUSAL AND CANCELLATION OF LICENCE AND/OR INSURANCE COVER

I accept the conditions of, and acknowledge the risks arising from, attending or participating in Motorsport Activities being provided by Motorsport Australia and the Entities. I agree to be bound by the rules, regulations and policies of Motorsport Australia at all times as a condition of continuing to hold a licence. The information I have entered into this form is true and correct and I will advise Motorsport Australia immediately if any of the information I have given is no longer true and correct. I have read, understood, acknowledge and agree to the above including the exclusion of statutory guarantees, warning, assumption of risk, release and indemnity.

SIGN HERE

DATE

—

—

## Parent/Guardian Consent (must be completed for all applicants under 18 years of age)

I \_\_\_\_\_ of \_\_\_\_\_ am the parent/ guardian of the above-named ("**Minor**") who is under 18 of age. I have read this document and understand its contents, including the exclusion of statutory guarantees, warning, assumption of risk, release and indemnity, and have explained the contents to the Minor. I consent to the Minor attending or participating in the event at his or her own risk.

SIGN HERE

DATE

—

—

## Your Privacy

Motorsport Australia requires the above information to assess your application for a licence and, if successful, to provide you with Motorsport Australia's services. The information provided by you may be used and disclosed to others by Motorsport Australia for the purposes of Motorsport Australia's business. Motorsport Australia may not be able to issue a licence to you if you do not provide all of the information requested above. Full details of Motorsport Australia's privacy policy (including how you can access and correct your personal information and make a complaint) are available at the Motorsport Australia website (motorsport.org.au).

Motorsport Australia and its partners may send you direct marketing materials from time to time. This is in addition to relevant information which Motorsport Australia may send to you as part of Motorsport Australia's services.

**Please tick this box if you DO NOT want to receive direct marketing from Motorsport Australia or its partners.**

**PLEASE RETURN TO: MOTORSPORT AUSTRALIA, PO BOX 172, CANTERBURY VIC, 3126 or email to: memberservices@motorsport.org.au**

**Important** If significant abnormalities are found, please obtain specialist opinion or pathology as indicated and return with this form. If doubtful, refer to the Member Hotline – 1300 883 959.

**Notes:**

1. Photo ID required.
2. Please attach any Specialists' reports or any pathology or radiology results relevant to this application.
3. If the applicant wears contact lenses, please attach to this report a certificate from the Ophthalmic Practitioner who fitted them, stating their (i) stability, (ii) duration of daily use and (iii) condition.
4. BMI (i) The Body Mass Index is weight (in kilograms) divided by the square of the height (in metres).  
(ii) 20-25 Acceptable – normal range  
25-30 Health risk area  
30-35 Obese  
35-40 Morbidly obese
5. References to Cardiovascular or CV score allude to the Framingham Study.
6. The 'normal' answer to each question below is 'NO'. In respect of each 'YES' response, further details should be provided in Examiner's Comments.

Member's name: \_\_\_\_\_ Member (licence) no: \_\_\_\_\_ Licence level: \_\_\_\_\_

What is the applicant's: Height (in cm) \_\_\_\_\_ Weight (in kg) \_\_\_\_\_ Body Mass Index \_\_\_\_\_ CV Score \_\_\_\_\_

Reference to CV Score chart also required for all applicants.

**Cardiovascular System**

What is the pulse rate? (MAX 100) \_\_\_\_\_  
 Is the rhythm abnormal?  Yes  No  
 What is the blood pressure? (MAX 150/90) \_\_\_\_\_ / \_\_\_\_\_  
 Are the peripheral pulses abnormal?  Yes  No  
 Is there any evidence in the history or examination of past or present ischaemic heart disease?  Yes  No

Fasting LIPIDS LDL \_\_\_\_\_  
 HDL \_\_\_\_\_

Fasting GLUCOSE \_\_\_\_\_

**Respiratory System**

Is there any abnormality of the respiratory system on examination?  Yes  No  
 Is the applicant a smoker?  Yes  No

**Abdomen**

Is there any abnormality of the abdomen on clinical examination?  Yes  No

**Urinary Examination**

Does the applicant's urine contain Protein  Yes  No  
 Glucose  Yes  No  
 Other abnormality?  Yes  No

**Locomotor System**

1. Physical deformity, amputation or use of any orthopaedic appliance?  Yes  No  
 2. Is there any impaired functional use, either from 1 (above) or otherwise?  Yes  No  
 Has the applicant impaired use or movement of any limb, joint, hand or foot which might impair or compromise control of a motor vehicle?  Yes  No

**Central Nervous System**

Is there abnormality of the cranial nerves, limb tone, power or co-ordination or tendon or plantar response on examination?  Yes  No  
 Is there any sensory impairment?  Yes  No

**ENT System**

Is there any evidence of past or present vestibular disturbance, including intermittent conditions?  Yes  No  
 Is there any abnormality of the ENT system on clinical examination?  Yes  No

**Visual System**

Has the applicant any evident abnormality of the eyes?  Yes  No  
 Are contact lenses worn? (Certificate of Ophthalmic Prac. required if YES)  
 Has the applicant undergone refractive surgery? (Certificate of Ophthalmic Practitioner required if YES)

**Visual Acuity**

Test each eye separately with letter chart at 6m  
 Record in metric Snellen notation: eg, 6/9  
 Record number of errors made in smallest line read: eg, 6/9 -3 RE LE  
 Unaided (without contact lenses or spectacles) 6/ \_\_\_\_\_ 6/ \_\_\_\_\_  
 With spectacles or contact lenses 6/ \_\_\_\_\_ 6/ \_\_\_\_\_

**Visual fields**

Do a confrontation test for each eye separately.  
 Is there any ocular or general medical history that suggests the possibility of visual field loss?  Yes  No  
 Does the confrontation test suggest a loss of visual fields in either eye?  Yes  No

**Colour vision**

Test with Ishihara for first licence only.  
 More than three (3) errors is a FAIL indicating abnormal colour vision.  
 Ishihara test failed?  Yes  No  
 If YES, the applicant will most likely need to be referred for a full eyesight examination by an optometrist or an ophthalmologist or  
 when visual acuity (with glasses if any or unaided if no glasses) is:  
 – less than a full 6/7.5 in either eye (International Licence)  
 – less than 6/9 -2 in the better eye or less than 6/18 -2 in the other eye (National Licence)

The applicant should contact Motorsport Australia to obtain a copy of the Vision Report Form to be completed by the optometrist or ophthalmologist they consult. When completed, the form should be returned to Motorsport Australia and included with the Medical Examination Record. Motorsport Australia will take into account the optometrist/ophthalmologist report when determining the applicant's fitness to participate in motorsport.

## ECG

A *resting ECG* is required with *all* Medical Examinations.

ECG Results: \_\_\_\_\_ / \_\_\_\_\_

Other comments:

ECG abnormal?  **Yes**  **No**

If abnormal, date completed: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

## Examiner's Comments

1 On history:

2 Are there any unfavourable traits in applicant's personality, revealed by history, appearance or behaviour?

3 Has the applicant been prescribed drugs which are in contravention of the Motorsport Australia Anti-Doping policy, or inhaled asthma medications?  
If so, please advise drug, dosage and reason:

4 In your opinion, is the applicant fit to participate in motorsport?  **YES**  **NO**  **FURTHER ASSESSMENT**

## Statement by Registered General Practitioner

The applicant was examined on: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Applicant's photo ID sighted?  **YES**  **NO**

Are you the applicant's normal GP?  **YES**  **NO**

Name of medical examiner: \_\_\_\_\_

Address of medical examiner: \_\_\_\_\_

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

Examiner's signature

SIGN HERE

MEDICAL  
EXAMINERS  
STAMP

**This medical is only valid for 3 months from the date of examiners signature**

Please return to: MEMBER SERVICES, PO BOX 172, CANTERBURY, VIC 3126 or email to: [memberservices@motorsport.org.au](mailto:memberservices@motorsport.org.au)

### MEMBER SERVICES AND STATE MEDICAL ASSESSORS USE ONLY

MEMBER NO.

NEXT EXAM DUE

INT

Medical every year

NAT

Medical every two years

UNFIT

MEDICAL DETAILS TO BE ENTERED ON LICENCE:

VISUAL CORRECTION REQUIRED?  **YES**  **NO**

OTHER (PLEASE SPECIFY):

ASSESSOR'S SIGNATURE

SIGN HERE

DATE