



2019 CHAMPIONSHIP LICENCE APPLICATION

Boat name:	Registration #:
Class:	Driver/Co-driver:/Throttles:

First Name:	Date of Birth:
Surname:	Email:
Address:	Home phone:
	Work phone:
	Cell phone:
Postal address (if different from above):	Next of kin:
	Relationship:
	Phone number/s:

I have read and understood the 2017 National Rules and the 2016 UIM Offshore Rules

- Yes
 No

I have attached my completed my Medical declaration form (if not already sent in)

- Yes
 No

I hereby declare, to the best of my knowledge, that the above information is true and accurate. I understand that any information given falsely or withheld could affect my eligibility to compete in this championship.

Applicants Signature **Date**

TO BE COMPLETED BY NZOPA OFFICIALS:

Criteria	Name:	Signature:	Date:
Confirm applicant has competed in at least 3 NZOPA sanctioned races or complied with NZOPA rule 104.V requirements			
Confirm applicant has completed current CPR Course and Dunk Test (if relevant).			
Confirm applicant has a completed Medical Declaration Form			

**APPLICANT DECLARATION AND PRIVACY ACT, CONDITIONS ACKNOWLEDGEMENT
AND LIABILITY WAIVER FORM**

I hereby apply for the issue of a Competition License for the racing class which I intend competing in.

I undertake to be bound by the International Rules of the UIM and the National Rules of the New Zealand Offshore Powerboat Association Inc. any conditions or amendments thereto and by the provision of the supplementary Regulations of every event, for which I may enter, or be entered.

I certify that the information as per the license application form is, to the best of my knowledge and belief, true and correct in every particular.

I consent to the collection of details on this license application form by the New Zealand Offshore Powerboat Association Inc. for license registration and statistical purposes and for it to retain, use and disclose these only in accordance with the current rules and regulations of the New Zealand Offshore Powerboat Association Inc.

I acknowledge my right to access and make corrections to this information.

This consent is given in accordance with the Privacy Act 1993.

Warning

Offshore Power Boat Racing is an inherently dangerous sport, and accidents can occur which may result in my being injured. I declare that I have voluntarily read and understood this warning and accept and assume the inherent danger and risks involved. I declare that I will abide by the rules of the NZ Offshore Powerboat Association.

Release and Indemnity

In consideration of the NZOPA in allowing my/our entry into and participation in the event, I hereby discharge the NZOPA Officer's, officials and organizers, from all actions, suits, proceedings, costs and expenses however arising, that I may have or may have had but for the release arising from or in connection with my/our participation/entry in the event.

Exclusion of Liability

We the undersigned, absolve the organizers, any sponsors and volunteers, and the New Zealand Offshore Powerboat Association Inc, its officers, servants or agents, (collectively the Association) of any liability arising out of my participation in this event or in any way due to any negligent act, breach of duty, default and/or omission on the part of the above mentioned.

Insurance

I/we have been advised to take steps to insure myself against loss, damage or injury to myself or my property or equipment.

I/we have read, understand, acknowledge and agree to the above warning, exclusion of liability, release and indemnity and insurance acknowledgements and assume with full knowledge the danger inherent in the sport of offshore powerboat racing.

Applicant's Signature

Date

Applicant's Printed Name