

Application for Private & General Testing at Queensland Raceway/Lakeside Park

Tel: 61 7 5461 9100 Fax: 61 7 5461 9111 PO Box 100 Amberley QLD 4306 www.qldraceways.com.au

Applicant:		Date of Birth:	Civil Licence # : Comp Licence #:	
Postal Address:		Town:		Postcode:
Tel (wk):	Tel (hm):	Mob:	Fax:	
Email Address:	,	1	QR PASS #	
Vehicle	Make	Model	Capac	city

Application to Test

I, the undersigned, of my own free will hereby apply to Queensland Raceways Operations Pty Ltd ("Track Operator") for permission to enter and use the property known as Queensland Raceway/Lakeside Park (the Track) for the purposes of testing an engine powered conveyance e.g. car or motorcycle, as a spectator, driver, trainee, passenger, crew or any combination of these.

Warning of Risk

I acknowledge and agree that high performance and/or competition testing is dangerous and that accidents can and often do happen. I agree the Track Operator has the right to terminate any test session at any time for whatever reason its sees fit at the time. I declare that I have read and understood these warnings and accept all the inherent risks and danger in testing and the activities surrounding the testing.

Exclusion of Liability

I agree to absolve the Track Operator from all liability however arising from injury or damage however caused (whether fatal or otherwise) arising out of my use of Queensland Raceway/Lakeside Park in any capacity.

Indemnity

In consideration of the Track Operator granting me the use of the Track I agree to indemnify them in respect of any actions, suits, proceedings, claims, demands, losses, damages, costs, penalties, fines, whatever arising as a result, directly or indirectly, of my use of the Track or any act or omission (including negligence) on the part of the Track Operator.

Should any incident occur in a public area as a result of my failure to comply with the normal circuit rules or a direction given from an official whereby a successful claim is made under any insurance policy relating to the Track and an excess premium or deductible is charged by the insurer of the Track I will if required pay the excess or deductible under such insurance policy except to the extent that it is paid by a third party.

Condition of the Track

I acknowledge that I have thoroughly inspected the Track and found it to be in safe condition for the activities I intend

to undertake. By using of the If an act or occurrence in which	Track I indicate acceptance of the T	Crack's condition for the activity(s) I will undertake the safety of the Track I will immediately notify the creased risk.
		nings, exclusion of liability, indemnity and inspected and damage inherent in any testing activity.
Applicants Signature:		///
CONSENT STATEMENT FOR	R APPLICANTS WHO ARE MINOR	S
consent to them participating in the 'be under any liability whatsoever fo	Testing. In doing so I acknowledge that testi	named applicant have read the whole of this document and ing is dangerous, and agree that the Track Operator shall NOT ge which may be sustained or incurred by the minor or by me ace or otherwise.
Signature of Parent/Guardian:		//
(Delete whichever does not apply) The above information is for	Queensland Raceways use only. Please tick h	here [] if you do not wish to be added to our mailing list.
Amt Paid: \$	CASH / CHQ / EFTPOS	RECEIPT NUMBER:
10-500-3 OR Testing Indemnity.doc		