

Tel. National Number: 0861 672 672 JHB: 2711 675 2220. Fax: 2711 675 2219 KZN: Tel: 2731 266 5640/ Fax: 0866 123 462/WC: 2721 556 1026 / Fax: 0866 123 465 Online  
 Licenses: [www.msaonline.co.za](http://www.msaonline.co.za) General Email Support: [support@motorsport.co.za](mailto:support@motorsport.co.za) or [msa@motorsport.co.za](mailto:msa@motorsport.co.za)

### 2019 OFFICIAL LICENCE APPLICATION FORM

License Number (If Renewing) :	ID OR PASSPORT NUMBER:	Date of Birth:
Name:	Surname:	Postal Address:
Postal Code:	Landline:	Mobile:
Region e.g. Border:	E-mail:	
Ethnicity:	Gender:	M F Development: Y N Club:
Did you attend the prescribed MSA GCR Seminar, written and passed the exam?	Y N	Region where GCR Seminar was attended? Have you passed the category specific exam? Y N

PLEASE SELECT YOUR CATEGORY AND INDICATE GRADING (E.G. GRADE A, B OR C)

CATEGORY	SELECTION	GRADING - SELECTION	OTHER CAPACITIES – PLEASE INDICATE SHOULD YOU OFFICIATE		
Circuit Cars			Clerk of Course		
Circuit Motorcycles			MSA Steward		
Karting			Circuit Marshal		
Drag Racing			MSA Technical Consultant		
Motocross			Judge of Fact		
Enduro			Scrutineer		
Drifting			Non-Circuit Marshal		
4x4 X-Track Racing			Medical Personnel		
Cross Country Motorcycles and Quads			Environmental Officer		
Cross Country Cars			Time Keeper / Scorer		
Regularity Rallies			Route Marker (OR)		
Rallies			Observer		
Supermoto			Race Secretary		
Oval Dirt			<b>GROUP PERSONAL ACCIDENT INSURANCE – BASIC BENEFITS</b> (GPA Insurance information is available on the MSA Website <a href="http://www.motorsport.co.za">www.motorsport.co.za</a> )		
Oval Tar				Medical Expenses	Death Benefit
Spinning				Annual Premium R 89.00	R 500 000

#### GROUP PERSONAL ACCIDENT INSURANCE COVER PROVIDED BY MSA AT NO CHARGE FOR MSA OFFICIALS

Nominated Beneficiary	
ID Number	
Contact Number	
I confirm that I will familiarize myself with all MSA Rules and Regulations, and that I will adhere to/comply with these at all times. I further confirm that the information supplied above is Correct. I also undertake to inform MSA of any changes to my contact details and agree to receive motorsport newsletters electronically.	
Signature of Applicant or Parent/Guardian (if under 18)	Date

**ATTENTION**

Regular participation in/or attendance of motorsport events may result in hearing loss. Competitors, service crews, families and officials must be aware that it is their responsibility to protect their hearing by wearing protective devices.

**"I acknowledge that my conduct as an official is required to meet the standards set out in MSA's Code of Conduct for officials (as published on the MSA website) and accept that any breach of this code of conduct will be deemed to be a breach of MSA's regulations and may result in action being taken against me."**

**MSA reserves the right to request a Medical Certificate of present health condition should it be deemed necessary. Claims may be rejected should the Organising Club fail to confirm your official capacity in an event more than 72 hours after the finish of an event.**

**DECLARATION, UNDERTAKING, WAIVER AND INDEMNITY TO BE COMPLETED AND SIGNED BY EVERY OFFICIAL AT AN MSA SANCTIONED EVENT**

I, (full names) .....

of (address) .....

have read and agree to be bound by the general competition rules (**GCR's**) of Motorsport South Africa (**MSA**), and I agree to be bound by the standing supplementary regulations (**SSR's**) issued for any competitions at which I officiate. I agree that neither MSA, nor the promoter, organiser, any vehicle owners or possessors, guarantor and/or sponsor of any competition or the owner/s of the property on which a competition is held, nor any government, provincial or municipal body, and their respective officials, agents, servants or representatives shall be liable under any circumstances for any damage or for any personal injury – fatal or otherwise – or loss of whatever kind sustained by myself whilst being present at or attending upon, whether whilst officiating or otherwise, any track or road or area forming part of the track or route, or any deviation there from or any approach thereto (**the event venue**), whether caused during any competition or any practice run or at any time whatsoever, by whatever means such damage, injury or loss may be caused, and even though same may be contributed to or caused by the willful act, neglect or default of any official, agent, servant or representative of MSA, competitor or any promoter, organiser, guarantor or sponsor of the competition, or the owner/s of the property on which the competition is held or any government, provincial or municipal body.

I hereby indemnify MSA, the promoter, the organizer, competitors, the guarantor and the sponsor of the competition and the owner/s of any property on which the competition is held and any government, provincial or municipal body and their respective officials, agents, servants and representatives against and legal liability for any damage or for any personal injury – fatal or otherwise – or loss of whatever kind sustained by myself as aforesaid.

I further admit and declare that I am fully aware of and appreciate the ambit and extent of the risks, dangers and perils attendant upon being present at or attending upon, whether whilst officiating or otherwise, motor vehicle, motorcycle and quad racing, rallying, karting or any other form or motoring competition of whatever nature. I hereby voluntarily assume and consent to such risk and the risk of damages arising there from or injury or loss being sustained by myself or any other person as a result thereof. I elect to enter upon event venues, wherever situated, fully aware of the dangers present and also aware that the conditions at any event venue may become more hazardous during events and in the course of my attendance at the event venue.

I further agree that this assumption of and consent to risk shall operate against my dependants and/or heirs, executors and administrators. I furthermore acknowledge and accept that I, as an MSA official, am personally bound by MSA's GCR's and SSR's.

This indemnity shall apply to all competitions and practices held under the authority of a permit issued by MSA, or for which a waiver from the need of holding such a permit has been granted by MSA, and which I attend, whether whilst officiating or otherwise.

I hereby represent to MSA and warrant that I am 18 years of age or older, alternatively, if the Applicant is under 18 years of age, then the section under Parent/Guardian/Curator must be completed and signed as indicated.

SIGNED AT .....this the .....day of .....**2019**

SIGNATURE OF THE APPLICANT: ..... ID No.....

Assisted by (if the Applicant is a minor)

SIGNATURE OF PARENT/GUARDIAN/CURATOR: .....

***DECLARATION BY PARENT/GUARDIAN/CURATOR***

I (full names) .....

in my capacity as Parent/Guardian/Curator of the Applicant hereby consent to the participation of my child/ward in the activities referred to in this **DECLARATION, UNDERTAKING, WAIVER AND INDEMNITY**. I agree that this endorsement of consent by me is an indivisible and integral part of this **DECLARATION, UNDERTAKING, WAIVER AND INDEMNITY** which I have also signed. I fully understand and appreciate the contents thereof and I have satisfied myself that the contents are, in like manner, so understood by my child/ward. I hereby assist my child/ward in contracting with MSA as envisaged herein, both of us being aware that this **DECLARATION, UNDERTAKING, WAIVER AND INDEMNITY** is to his/her detriment.

I furthermore bind myself jointly and severally, in solidum, as surety and co-principal debtor with my child/ward in favour of MSA for the due performance of any obligation arising out of this **DECLARATION, UNDERTAKING, WAIVER AND INDEMNITY**.

SIGNED AT .....this the .....day of .....**2019**

SIGNATURE OF PARENT/GUARDIAN/CURATOR: .....

# **2019 - DECLARATION FOR FITNESS TO OFFICIATE IN MOTORSPORT**

## **MOTORSPORT IS DANGEROUS**

1. The MSA Medical Panel is responsible for ensuring that Officials applying for a licence is physically and psychologically fit enough to officiate at events and will not endanger his/her own safety or that of others. In the event of a query please contact the President of the Medical Panel in writing.
2. Regular participation in/or attendance of motorsport events may result in hearing loss. Competitors, service crews, families and officials must be aware that it is their responsibility to protect their hearing by wearing protective devices.
3. The following conditions **may** exclude an Official from obtaining a licence:
 

3.1 Amputation of a limb	3.7 Neurological disorders
3.2 Loss of vision	3.8 Epilepsy and/or Convulsions
3.3 Deafness	3.9 Current / recent chemotherapy or Radiation therapy
3.4 Diabetes (Type 1 and Type 2)	3.10 Recent Transplantation
3.5 Cardiovascular Disease, Arrhythmias, Hypertension	3.11 Drug or Alcohol abuse
3.6 Recent Cardiac Surgery	3.12 Use of banned substances (refer SAIDS & WADA)

*This list is an example and is not fully inclusive. A full list of excluding medical conditions is contained in the MSA Medical Code (Appendix L)*

4. **Cases of doubt must be referred to the MSA Medical Panel for a final decision.**

### **MEDICAL HISTORY**

**Do you suffer from or have you ever suffered from any of the following disorders:**

	YES	NO		YES	NO
1. Epilepsy or Loss of consciousness for any reason			13. G.I.T. (gastrointestinal) Problems		
2. Hemiparesis, Hemiplegia or Paraplegia			14. Kidney Problems		
3. Recurrent dizziness or headache			15. Type 1 or 2 Diabetes Mellitus		
4. Head injury or concussion			16. Any blood disorder or Bleeding tendencies		
5. Mental nervous disorder			17. Bone or Joint Injury or disease		
6. Impaired vision in one or both eyes			18. Amputation of part of or an entire limb		
7. Deafness in both ears			19. Cancer or Organ transplantation		
8. Heart or Heart Valve problems			20. Any other Illnesses		
9. Hypo or Hypertension			21. Any Operations within the past 5 years		
10. Any other cardiovascular problem			22. Do you take prescription medication		
11. Asthma			23. Allergy to medication or other substances		
12. Any other chest / respiratory problem			<b>24. Have you ever been prohibited from officiating in any form of sport on medical grounds?</b>		

**If you answered YES to any of the above questions, please provide full details for each numbered, including the dates of diagnosis or injury and attach to the declaration of fitness form, you will also be required to provide medical reports.**

**In accordance with the protocols of MSA's Anti-Doping Code all motorsport competitors & officials should be aware that they may be tested for prohibited substances, both during and out of competition. In accordance with this regulation I accept and understand that I may be tested for prohibited substances either during or out of competition. I further understand that, should I test positive on the samples submitted that I will be subject to disciplinary action as detailed in the MSA Anti-Doping Code as prescribed by WADA.**

#### **DECLARATION AND UNDERTAKING BY OFFICIALS:**

Every Official shall sign the following declaration and undertaking:

1. I the undersigned \_\_\_\_\_ hereby undertake to notify MSA, prior to any event that I intend officiating in, and as soon as possible after becoming aware of any condition or disability or any other medical or any other condition which I am suffering from, whether permanent or temporary, which may have an effect or impair my ability and competency to officiate in such event or which may impair my ability.
2. I further undertake not to officiate in such event unless MSA has, following such notification, granted me express consent to officiate in such event.
3. I further declare that, notwithstanding the issuing of an Officials licence to me by MSA, I am aware that it is my responsibility to refrain from officiating in any event under circumstances where I suffer from any condition or disability or any other medical or any other condition which may have an effect or impair my ability and competency to officiate in such event, or which may endanger any person's safety, including my own safety.
4. I declare that to the best of my belief, I possess the standard of competency required to officiate in any event.

I accept and understand all details listed above and further understand that in the event that I have produced false information on this form my Officials licence will be revoked with immediate effect, and that I will be personally responsible for any or all action instituted against me as a result of having provided false information. I certify that I am physically and psychologically **FIT** to officiate in all categories of motorsport and should it be found that I am not fit I confirm that I accept that the Insurers will not entertain any claims submitted by myself.

**SIGNATURE OF OFFICIAL:** \_\_\_\_\_

**DATE:** \_\_\_\_\_