

SECTION 3. ANNUAL MEDICAL SELF DECLARATION MUST BE COMPLETED BY ALL COMPETITORS

Competition No.: _____

Name: _____

Date of Birth: _____

Sex: Male / Female

Your Doctor's name:				
Doctor's address:				
Doctor's phone number:				
1.	Have you ever been rejected life assurance for medical reasons?	YES	NO	(If 'Yes', give details in the box provided)
2.	Have you been prescribed or are you taking any of the substances shown in the WADA listings?	YES	NO	(If 'Yes', give details in the box provided)
3.	Do you have a physical problem with, or permanent difficulty in, using your arms or legs for driving?	YES	NO	(If 'Yes', give details in the box provided)
4.	Do you have any congenital abnormality of any limbs, or amputation, or any other disability?	YES	NO	(If 'Yes', give details in the box provided)
5.	Have you had any surgical procedures within the last 2 years?	YES	NO	(If 'Yes', give details in the box provided)
6.	Do you suffer from any allergies for which you take medication or otherwise?	YES	NO	(If 'Yes', give details in the box provided)
7.	Have you ever had any disease or disorder of the eyes other than needing glasses or contact lenses?	YES	NO	(If 'Yes', give details in the box provided)
8.	Are corrective lenses (contact lenses or glasses) required for driving?	YES	NO	(If 'Yes', give details in the box provided)
9.	Have you ever been treated for – do you now have – or have you ever had any of the following:			
a.	heart disease or a heart disorder?	YES	NO	(If 'Yes', give details in the box provided)
b.	a psychiatric illness, mental disorder including treatment for depression or any behavioural problem including ADHD?	YES	NO	(If 'Yes', give details in the box provided)
c.	head injury with concussion or unconsciousness?	YES	NO	(If 'Yes', give details in the box provided)
d.	dizziness, fainting fits, epilepsy or blackouts?	YES	NO	(If 'Yes', give details in the box provided)
e.	do you take, or have ever taken, such drugs as opium, morphia, cocaine, heroin, cannabis etc.?	YES	NO	(If 'Yes', give details in the box provided)
f.	Do you have Diabetes? If you are Insulin – Dependent Diabetic please ask your Doctor to fill in 'Additional Comments' box stating that your condition is well controlled by the prescribed medication.	YES	NO	(If 'Yes', give details in the box provided)

If you ticked 'Yes' to any of the above, please give detailed information in the box provided. It may be necessary for you to provide a written medical report from your General Practitioner or Specialist.

ADDITIONAL COMMENTS:

I hereby declare that the above statements are true and accurate and I give permission to any hospital or medical practitioner to furnish information relating to my medical state to Motorsport Ireland.

Applicant's signature:

Date:

Parent's/Guardian's signature:

Date:

SECTION 4. DO YOU NEED A MEDICAL?

Applicants applying for International Licences:

Medical examination must be carried out each year by a doctor less than 3 months before the application for an International Driver's/Navigator's licence is submitted.

N.B. Cardiovascular aptitude examination must be carried out every two years:

- for competitors aged under 45, a 12 –lead ECG;
- for competitors aged 45 and over, a stress test ECG;

Applicants aged 45 and over applying for National Race, Kart, Speed, Stage Rally Driving & Midget Car Racing Licences:

- You are required to submit a new Doctor's Certificate from your doctor each competition year.

N.B. No ECG required.

Applicants aged under 45 for National Race, Kart, Speed, Stage Rally Driving & Midget Car Racing Licences:

- If you HAVE previously provided a Doctor's Certificate you are not required to submit one unless requested by MI.
- If you HAVE NEVER provided a Doctor's Certificate to MI you're required to have your doctor complete section 5.

SECTION 5. DOCTOR'S CERTIFICATE

Medical examination must be carried out by a doctor of medicine authorised to practice in the Republic of Ireland or the U.K.

To your doctor – Please ensure that ALL questions have been answered. Note that ANY missed or unanswered questions will require further information to be submitted by you.

1. Doctor's name and qualifications:.....

1a. Doctor's practice stamp:

1b. Applicant's FULL name

Date of Birth:	
Height (cm)/Weight (kg)	
Blood Pressure:	/

2.	Are you the regular attendant of the applicant?	YES	NO
3	Date when the ECG performed? (ECG is valid for two years)		
3a	Is the 12 lead resting ECG normal? (for International licence applicants aged UNDER 45)	YES	NO
3b	Is the Stress Test ECG normal? (for International licence applicants aged 45 and OVER)	YES	NO
4	Is there any abnormality of the heart or cardiovascular system? If 'Yes', give details below.	YES	NO
5	Does the applicant have any physical abnormality or restriction of movement in the arms or legs? If 'Yes', give details below?	YES	NO
6	Vision – To be recorded in metric Snellen acuity:		
6a	Uncorrected (without corrective lenses)	R /	L /
6b	Corrected (wearing corrective lenses if necessary)	R /	L /
6c	Is there any ocular history of visual field loss? If 'Yes', give details below.	YES	NO
6d	Are there any abnormalities on the colour vision (Ishihara) test? If 'Yes', give details below.	YES	NO
7	Has the applicant been immunised against tetanus in the past 10 years?	YES	NO
8	Is there any evidence of a physical or mental condition in the applicant's medical history? If 'Yes', give details below	YES	NO
9	Does the applicant require special medical supervision? If 'Yes', give details below.	YES	NO
10	In view of the above stated results of my examination, I recommend that:		
10a	The applicant is physically and mentally fit to drive in Race, Kart, Speed and Rally events. If 'NO' please complete Q10b.	YES	NO
10b	The applicant be reviewed by the Motorsport Ireland Medical Panel	YES	NO

If you have ticked 'Yes' to any of the questions above, please provide further details in the box below

Doctor's comments:

Doctor's signature:

Date of examination:

SECTION 6. LICENCE(S) YOU NEED

- Tick the appropriate boxes to show the licence(s) you are applying for.
- Licences expire on the 31st December of the year for which they are issued. A competitor may use a 2015 licence during December 2014.
- If you are applying for two or more categories of Licence at the same time, the total licence fee will be the cost of the most expensive only.
- The fees below are for members of clubs affiliated to Motorsport Ireland.
- If you do not hold an Irish passport you have to supply MI with proof of permanent residency within the ROI, e.g. a utility bill showing your name and full Irish address.
- Please remember that you cannot apply for an entrant licence with this form. Please use separate application form available on MI website.
- Applicants must complete an Introduction to Motorsport Course (IMC) prior to being issued with any of the following licences: Race Junior, Race National B, Stage Rally National B.
- Any applicant who applies on or after the 1st September in any given year will be provided with an option to renew their First Time licence for a second year at the same concessionary price.

Please indicate your MAIN TYPE OF MOTORSPORT in which you intend to compete

RACE/KART	RALLY	SPEED	CLUBMAN
Kart Racing	Special Stage Rallying	Rallycross	Sporting Trials
Circuit Racing	Historic Stage Rallying	Rallysprint	4x4 Trials
	Navigation Trials	Sprint	Midget Car Racing
	Retrospective Trials	Autocross	Autotest
	Endurance Trials	Hillclimb	

2015 LICENCE RENEWAL CATEGORIES

LICENCE CATEGORY	CODE	FEE	
Car and Kart Racing			
RACE			
National B (16+)	024	€40	
Junior Race (14-16)	177	FREE	
Kart Racing ONLY			
KART			
National B (16+)	172	€40	
Junior Kart (12-16)	025	FREE	
Cadet Kart (8-12)	026	FREE	
Rallycross, Rallysprint, Sprint, Hillclimb & Autocross			
SPEED			
National B (16+)	029	€40	
Junior Speed (14-16)	042	FREE	

LICENCE CATEGORY	CODE	FEE	
Navigation/Endurance/Retrospective (Road) Trials & Special Stage Rallies (Stage Rally)			
STAGE RALLY			
National B (17+)	027	€40	
Navigator (16+)	028	€40	
ROAD (for Navigation, Endurance & Retro Trials)			
Road National B (17+)	036	€40	
Sporting/4x4/Production Vehicle Trials, Midget Car Racing, Autotest, Multi-Venue Autotests & Autosolos *Multi-Venue Autotests require IRDS ✓*			
CLUBMAN			
National B (16+)	030	€40	
Junior (14-16)	031	FREE	

ADDITIONAL FEES

PRIORITY	025	€ 25.00	In extreme cases & at the sole discretion of MI Cover Notes may be provided.
UPGRADE	022	€ 10.00	This applies when event finishes for an upgrade are provided.
DUPLICATE	103	€ 20.00	In cases of licence replacement or adding a new licence category during competition year (request will be accepted in writing only).
NON-MEMBER SUPPLEMENT	023	€	Non-member supplement fee = licence fee.

SECTION 7. PAYMENT OPTIONS

Cheque and Postal Orders are to be made payable to 'Motorsport Ireland'

Cheque / Postal Order / Cash / Debit or Credit Card (complete the section below) for the amount: € _____

Cardholder's Name: _____ Signature: _____

VISA or MASTER Card Number:

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CVV:

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Expiry Date:

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