

Second Driver Form

SECOND DRIVER FORM - \$80

Track Indemnity

I, the undersigned, hereby confirm and warrant and agree to be bound by the following terms and conditions in favour, and for the benefit of Levels Raceway and all Employees, 4 & Rotary Promotions and Premier Events:

1. I have not consumed any alcohol or other drugs or substances which may affect my ability to drive, for the period of twelve (12) hours before signing this indemnity form.
2. I will comply with the Occupational Safety and Health Regulations by Levels Raceway at all times.
3. I will at all times comply with the instructions of the Levels Raceway and 4 & Rotary employees and agents.
4. I will exercise all due care and will at all times comply with the Safety Regulations of the Levels Raceway.
5. I understand that the Levels Raceway Manager or any of their employees or agents may terminate and prohibit my access to the facility if I breach any of the terms in this indemnity form.
6. I will be responsible for and will pay to make good any damage I may cause, whether deliberately or otherwise, to any property of Levels Raceway and 4 & Rotary Promotions.
7. I will not hold Levels Raceway, 4 & Rotary Promotions or Premier Events responsible for any damage, injury or death caused by mechanical failure or otherwise of any vehicle supplied by those parties, whether directly or through a sub-contractor, or due to the state of Levels Raceway.
8. I understand that in consideration of Levels Raceway granting me permission to use the Levels Raceway Circuit I warrant all of the above and will indemnify Levels Raceway, 4 & Rotary Promotions, Premier events and together with their employees, directors, officials, representatives and agents from and against all actions, claims, costs, expenses and demands in respect of death, injury, loss or damage to person or property however caused, arising out of or in connection with my use of a vehicle and the Levels Raceway Circuit, including claims by third parties, notwithstanding that such claims may have been contributed to by the fault or negligence of Levels Raceway, 4 & Rotary Promotions, Premier Events and any/all Employees.

Please fill out both sections unless marked Staff Only.

Drivers Licence: _____

First Name: _____ Last Name: _____

Address: _____

Email: _____

Contact Number: _____

Car you intend to drive:

Car Make: _____ Model: _____

Number Plate: _____ Competitor #: _____

Signed: _____

PAID (STAFF USE ONLY): _____ (EFTPOS / CASH) Circle one.