



CC's Unlimited Kells Road Races 2026



Permit No: 26/187/RR

ENTRY FORM—PLEASE PRINT

Rider's Name: Age: Blood Group: Phone No:.....

Address: Club:

Rider's Competition Licence No: License Type..... Issued by (Governing Body):

Are you a Road Race Newcomer? Yes No Are you a Circuit Newcomer? Yes No

Fees €130/£110 per race up to a max of €300/Stg £250. €100/£100 will be required from Overseas Riders .

Enclosed: Cheque, Money Order, Payable to "Kells Road Races CLG" **NO CASH**

Bank Transfer A/C: IBAN - IE48AIBK93253127305012 BIC - AIBKIE2D

ENTRANT ONLY IF OTHER THAN RIDER

NOTE: Only Entrants with an Official MCUI, ACU or SACU Entrant's Licence will be accepted as an entrant

Name: Affiliated Club: Entrant's Licence No: Entrant's Licence Type.....

Address: Signed.....

No	Sunday (Championship)	Make	Model	CC	Year	Rider No	Transponder No.
1.	Support 401-750cc						
2.	Open 201-1010cc						
3	Support 201-400cc/650-700cc						
4.	Classic 250cc/350 cc						
5.	Lightweight 250cc-400cc						
6.	Supersport 600cc						
7.	Moto 3(Inc 125cc & SS300)						
8.	Supertwins 650cc/700cc						
9.	Classic 500cc/1000cc						
10.	Classic Superbike						
11.	Grand Final 590—1010cc						

May not be race order.

Event Dates: Saturday 20th—21st June 2026

Closing Date for Entries 23rd May 2026

Payment must accompany Entry Form.

Please Post to:

David Burke, Kells Race Secretary,

Old Dawsons Demesne, Ardee, Co. Louth. A92 FR60.

Contact: 087 2871152

Email: kellsraceentries@gmail.com

Website: www.kellsroadraces.com

For Office Use Only

Date Entry Received:

Euro Sterling

Cash:

Money Order:

Cheque:

Paid:

Cheque/P.O. No.

To Pay on Race Day

Rider No. Allocated

1. 2. 3. 4. 5. 6.

7. 8. 9. 10. 11.

Riders Road Racing Experience (Including Placings)

Number of Years:..... Details of Road Race Circuits Ridden:
.....
.....

MOTORSPORTS CAN BE DANGEROUS AND MAY INVOLVE INJURY OR DEATH
You must read and agree to the following declaration and paragraphs below which are designed to create a legally binding relationship in return for you being allowed to enter and compete.

PLEASE READ CAREFULLY BEFORE SIGNING DECLARATION

As a Competitor in this event I make this acknowledgement and acceptance of risk and waiver of my legal rights for the benefit of **Motor Cycling Ireland** which in this agreement means the company Motor Cycle Union of Ireland (Southern Centre) Limited, its officers, staff, volunteers, race officials, emergency responders, servants and agents or any of the aforementioned persons.

I **Acknowledge** that I am voluntarily and willingly accepting and assuming the risk that as a competitor I may suffer injury, death, loss or damage and I comprehend the nature and extent of those risks.

I **Waive**, to the full extent permitted by law, any claim I may have as a competitor against **Motor Cycling Ireland** in respect of any injury, death, loss or damage suffered, howsoever caused

I confirm that this **Acknowledgement & Waiver** can be relied upon in the defence of any action brought by me or my successors or assigns or surviving dependants against **Motor Cycling Ireland**, as defined above.

I acknowledge that motor cycling events are very dangerous and involve the risk of serious injury, death, loss or damage including property damage and that the actions and failures of **Motor Cycling Ireland**, as defined above, can cause or contribute to accidents and injury.

I am aware that the design and condition of an event site and the state of the premises, including the race course and competitors paddocks, can also cause or contribute to accidents and injury to competitors.

I confirm that my decision to compete on the day of an event will be made after I have satisfied myself as to the following matters;

- a) The suitability and condition of my vehicle and protective equipment.
- b) That I have the appropriate knowledge, experience and skill to compete in the events for which I have been entered.
- c) The design, lay-out and condition of the race course.
- d) The weather conditions.
- e) That I am familiar with the current rules and regulations governing the event.

I confirm that I am aware that I can on the day of an event withdraw from entering an event or retire from an event in progress.

I confirm that I was given, and I understand, final instructions either in writing or as a riders briefing

I consent to details of any injuries I may suffer at this event being passed between all medical services and the Clerk of the Course/Secretary of the Meeting

Rider Signature: _____

Please ensure YOU sign both the declaration above and sign the entry form itself below

Signed Date:

Contact Name In Case of Emergency (ICE): Phone No:

Contact Name in the paddock on the day (ICE) (if different than above):.....

Phone No.....

GDPR: This data will not be shared or processed for any other purpose. PLEASE TICK BOX