



Founded in 1902



CYCLING TIME TRIALS
the national governing body for CYCLING time trials
www.ctt.org.uk



PARENTAL CONSENT FORM TO BE SIGNED BY PARENT OR GUARDIAN OF ENTRANTS, TO ESSEX ROADS CC 2019 CLUB EVENTS, UNDER THE AGE OF 18

I (Name and Address)

Being the Parent (or Guardian) of _____

HEREBY AGREE to his/her participation in the Club Events promoted for and on behalf of Cycling Time Trials under their rules and regulations and **DECLARE** as follows –

1. I understand and agree that my said son/daughter participates in events promoted under the Company's Rules and regulations, entirely at his/her risk and without liability whatever on the part of the promoter, promoting club, Cycling Time Trials, its Chairman, National Committee Members, District Committee Members, Officers and Officials of member clubs, Event Secretaries (promoters), Timekeepers, Marshals, Course Measurers, Caterers or helpers in the conduct of the event in respect of any injury loss or damage suffered by him/her however caused whether by negligence or otherwise.
2. I understand that the function of the marshals in such events is to do no more than indicate the precise spot at which the rider should turn or the direction he or she should take and that the responsibility for safely negotiating a turn or any other change in direction must rest with the rider alone.
3. I understand further that all competitors in or in the vicinity of the event must observe the law of the land relating to road travel and when riding must ride alone and unassisted.
4. I am satisfied that my son/daughter is sufficiently responsible and experienced to assume full and entire responsibility for his/her own safety whilst engaged in a competition of this kind on the public highway.

SIGNED _____

DATE _____

Photocopied signatures are not acceptable.

WITNESS

(Signature, Name, Address _____
and Official Position in Club) _____

