CLUB STAMP

An additional €275 charge will be incurred without a club stamp or email from your club to MI confirming your membership.



34 DAWSON STREET DUBLIN 2, D02 RF90 TEL.: 01-677 5628 FAX: 01-671 0793 INFO@MOTORSPORTIRELAND.COM MOTORSPORTIRELAND.COM

2024 FIRST-TIME COMPETITION LICENCE FORM

SECTION 1: PERSONAL DETAILS

CLN	(FC	DR S	STA	FFl	JSE	ON	LY)	:					DATE OF PROPOSED FIRST EVENT:																
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FIRST NAME																													
SURNAME																													
DATE OF BIRTH			I			-																							
NATIONALITY																													
ADDRESS																													
TOWN																													
COUNTY																													
EIRCODE																													
TEL. HOME																													
TEL. MOB																													
EMAIL																													
*															_									_					

* FULL RTA DRIVING LICENCE IS	REQU	IRED	FOF	R DRI	VER:	S IN S	STAG	E RA	LLIES	AND	D NA	VIGA	TIO	N / E	NDU	RAN	CE / RETROSP	ECTI\	/E TF	RIALS	*	
ROAD DRIVING LICENCE NO.																	EXPIRY:					

COMMUNICATIONS CONSENT: You must tick this box to receive Motorsport Ireland communications including news, updates, exclusive offers & renewal reminders. If you do not do so, we cannot email you.

PLEASE READ THE DECLARATION AND SIGN AND DATE BELOW

- I hereby apply for registration for the year 2024 on the Competitors and Drivers Register of Motorsport Ireland and I undertake, if
 registered, to submit to and be bound by the International Sporting Code of the FIA and the General Competition Rules and
 Regulations of Motorsport Ireland, the Irish Anti-Doping Rules and any regulations supplementary thereto as may be imposed
 from time to time by Motorsport Ireland.
- I have read and understood the terms of issue and I am a permanent resident of the Republic of Ireland and/or I am an Irish National and I do not hold a current Competition Licence from any other ASN. I hold an Irish passport or I will supply proof of permanent residency within the ROI every year
- I hereby agree to abide by the guidelines and regulations contained in Motorsport Ireland's General Code of Conduct, the Code of Conduct for Children's Sport and Motorsport Ireland's Social Media Policy.

Your Signature:

Date:

If you are under 18, your parent or legal guardian must complete the box below Parent's or Legal Guardian's signature:

Date:

F	O R	R 0	F	F	1	С	ΙA	L	U	S	Ε	0	Ν	L	Y					
FIRST TIME RACE & STAGE RALLY DRIVERS		MI	DAT	E R	EC	EIV	ED					RE	CEI	VEC)/N	115511	IG/A	MEN	IDED	
															R	М		Α	ction	Α
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RACE/RALLY SCHOOL STAMP GOES HERE TO									CC/	′сн	IQ/P	o/ca	\SH							
SHOW TRAINING HAS BEEN COMPLETED									PA	ΥM	ENT	тот	AL							

SECTION 2: ANNUAL MEDICAL SELF DECLARATION

ANY MISSED LINES/QUESTIONS WILL RESULT IN A DELAY IN PROCESSING YOUR APPLICATION

DOCTOR'S NAME	
DOCTOR'S PHONE	
DOCTOR'S ADDRESS	

NO.	CATEGORY A	YES	NO
A1	Are corrective lenses (contact lenses or glasses) required for driving?		
A2	Have you ever been refused life assurance for medical reasons?		
A3	Have you had any surgical procedures within the last 2 years?		
A4	Do you suffer from any allergies for which you take medication or otherwise?		
A5	Have you ever taken any substance shown in the World Anti-Doping Agency listings? [See wada-ama.org]		
	IF YOU ANSWERED "YES" TO ANY QUESTION IN CATEGORY A, GIVE DETAILS IN THE BOX BELOW		

NO.	CATEGORY B	YES	NO
B1	Do you have diabetes?		
B2	Do you have a physical problem with, or permanent difficulty in, using your arms or legs for driving?		
В3	Do you have any congenital abnormality of any limbs, or an amputation, or any other disability?		
B4	Have you ever had any disease or disorder of the eyes other than glasses or contact lenses?		
B5	Have you ever had heart disease or a heart disorder?		
B6	Do you currently suffer from or are receiving treatment for any psychiatric or mental illness?		
B7	Have you ever had a head injury with concussion or unconsciousness?		
B8	Have you ever had dizziness, fainting fits, epilepsy, or blackouts?		
	IF YOU ANSWERED "YES" TO ANY QUESTION IN CATEGORY B. A DOCTOR'S CERTIFICATE IS REQUIRED		

PLEASE READ THE FOLLOWING DECLARATION AND SIGN AND DATE BELOW

I hereby declare that all above and previous 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. I give permission to Motorsport Ireland to digitally store my licence details and any medical records I provide them with. I undertake to advise Motorsport Ireland in writing without delay of any change in my state of health.

APPLICANT'S SIGNATURE (OR PARENT OR LEGAL GUARDIAN SIGNATURE IF AGED UNDER 18)	DATE

SECTION 3: DOCTOR'S CERTIFICATE

FOR DOCTOR'S USE ONLY

THIS PAGE IS REQUIRED FOR ANY/ALL OF THE FOLLOWING CONDITIONS:

ANY COMPETITOR WITHOUT A CERTIFICATE ON FILE (EXCEPT RALLY NAVIGATOR / CLUBMAN GRADES)

ANY COMPETITOR THAT IS AGED 50 YEARS OR OLDER (EXCEPT RALLY NAVIGATOR / CLUBMAN GRADES)

ANY COMPETITOR THAT ANSWERS YES TO A QUESTION IN SECTION 2: CATEGORY B

HEIGHT:	
WEIGHT:	

PLEASE RECORD VISION IN METRIC SNELLEN ACUITY (CORRECTED AND UNCORRECTED)

NO.	[IF YES, TO ANY QUESTION EXCEPT C1 OR C8, PLEASE PROVIDE DETAILS IN COMMENT BOX ABOVE]	YES	NO
C1	Are you the regular attendant of the applicant?		
C2	Is there any abnormality of the heart or cardiovascular system?		
С3	Does the applicant suffer from any neurological condition?		
C4	Is there any physical abnormality or restriction of movement in the arms or legs?		
C5	Does the patient show signs of abnormal blood pressure?		
C6	Is there any ocular history of visual field loss?		
C7	Are there any abnormalities on the colour vision (Ishihara) test?		
C8	Has the applicant been immunised against tetanus in the past 10 years?		
С9	Is there any evidence of a physical or mental condition that impairs the applicant from competing in motorsport?		
C10	Does the applicant require special medical supervision?		
C11	Is there a medical reason that the applicant should not compete in motorsport?		
C12	Do you recommend that the Motorsport Ireland medical panel review this applicant?		

DOCTOR'S NAME	
DOCTOR'S MEDICAL COUNCIL REGISTRATION NUMBER (OR G	ENERAL MEDICAL COUNCIL FOR UK)
DATE OF EXAMINATION	DOCTOR'S SIGNATURE
DOCTOR'S PRACTICE STAMP	DOCTOR'S COMMENTS

SECTION 4: LICENCE OPTIONS

YOU WILL ONLY BE CHARGED FOR THE MOST EXPENSIVE LICENCE CATEGORY PLUS ANY ADDITIONAL COSTS

INTERNATIONAL LICENCE GRADES MUST NOW USE A SEPARATE FIA INTERNATIONAL LICENCE APPLICATION FORM

PLEASE REFER TO YOUR CHAMPIONSHIP/EVENT RULES AND REGULATIONS BEFORE APPLICATION

ENSURE MEDICAL REQUIREMENTS ARE MET ON SECTION 2 AND SECTION 3 BEFORE APPLYING BELOW

SEE MOTORSPORT IRELAND YEARBOOK GCRS AND APPENDIX 1 FOR MORE INFORMATION

RA	ACE		Race licences can only be issued to those who have attended racing school. You must be at least 16 years old to hold a Nat. B licence or higher.
NATIONAL B	024	€60	Junior licences are for drivers aged 14-16 years old. Junior licences must be accompanied by a valid Competitor Entrant licence (separate form available
JUNIOR	177	€0	on motorsportireland.com).

KA	ART		Junior licences are for drivers aged 6-16 years old.
NATIONAL A	172	€60	Junior licences must be accompanied by a valid Competitor Entrant licence (separate form available on motorsportireland.com).
JUNIOR	025	€0	

RA	LLY		Rally licences (aside from Navigator) can only be issued to those who have attended rally schoo
NATIONAL B	027	€60	A Junior rally licence is for forest stage rally events only for drivers aged over 14 years old.
NAVIGATOR	028	€60	Nat. B is for drivers at least 17 years old, requires a valid RTA driving licence and a completed IR form.
JUNIOR	191	€0	

SP	EED		This allows you to compete in Rallycross, Rallysprint, Autocross, Sprint and Hillclimb events.
NATIONAL B	029	€60	You must be at least 16 years old to hold a National B licence or higher.
NATIONAL C	119	€60	Nat. C lets you drive in Autocross up to 1650cc and Midget car races. Junior licences are for drivers aged 13-16 years old.
JUNIOR	042	€0	

CLUI	BMAN		Clubman Road is only for drivers in Navigation, Endurance and Retro Trials as well as any event listed below. This licence was formerly known as Road National B. You will be given a Rally
ROAD	036 €60		Navigator grade in conjunction with this licence. You will be required to complete an IRDS form.
NATIONAL	030	€60	Clubman National lets you compete in Sporting Trials, 4x4 Trials, Production Vehicle Trials, Autosolos, Autotests and Multi-venue Autotests.
JUNIOR	031	€0	Junior licences are for drivers aged 13-16 years old.

ADDITION	AL CHA	ARGES	
NON-MEMBER	023	€300	Non-member fees must be paid if you are not a member of an M.I. affiliated club. MI Membership is a separate entity to MI affiliated clubs and is not valid as a club stamp.
PRIORITY FEE	021	€100	Priority fees apply to late applications which need to be processed within three days.
SAME-DAY FEE	021	€200	Same-day fees ensure same-day processing. An upgrade fee must be paid when supplying event finishes.
DUPLICATE	103	€50	Duplicate licence fees must be paid in the case of lost licence cards.
UPGRADE	022	€30	

NOTES BEFORE SUBMITTING AN APPLICATION

PLEASE NOTE THAT SOME LICENCE CATEGORIES REQUIRE ADDITIONAL ELEMENTS SUCH AS DOCTOR'S CERTIFICATES, IMC TRAINING COURSES, UPGRADES, OR ARE AGE RESTRICTED.

INCOMPLETE OR INCORRECT APPLICATIONS WILL RESULT IN A DELAY IN PROCESSING

IF YOU ARE UNSURE WHAT LICENCE CATEGORY IS REQUIRED FOR YOUR EVENT, OR YOU NEED TO CHECK WHAT REQUIREMENTS ARE NEEDED FOR YOUR LICENCE RENEWAL, THE FASTEST WAY TO GET AN ANSWER IS TO EMAIL US AT INFO@MOTORSPORTIRELAND.COM





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2024 PAYMENT FORM

SECTION 1: PERSONAL DETAILS

	-	r	r	r			r	r	-	-	r	-	r					—	
FIRST NAME																			
SURNAME																			
DATE OF BIRTH		I		I															

MI LICENCE NUMBER

SECTION 2: PAYMENT OPTIONS

	CARD NUMBER	EXPIRY	CVV
-		-	
EXACT NAME ON CARD:			

I authorise Motorsport Ireland to deduct the cost of any product / licence / service selected on this or any accompanying form or document which I have provided including all relevant and specified additional costs. Alternatively, I have provided the correct value in the form of cheque/cash/postal order and attached it to this form.

SIGNATURE:

IN ACCORDANCE WITH 2018 GDPR GUIDELINES, THIS PAGE WILL BE DESTROYED ONCE PAYMENT HAS BEEN COMPLETED. ANY SUBSEQUENT CHARGES TO YOUR ACCOUNT WILL REQUIRE FURTHER AUTHORISATION.