Generic Risk Assessment complied with?	Tick box to confirm ☐
Any additional hazards noted?	Yes*/No
*If yes, these must be noted and riders advised	

OFFICIAL SIGNING-ON SHEET (TYPE B (Club) EVENTS)

Event: **Date:**

The event is being run for and on behalf of Cycling Time Trials under their Rules and Regulations as shown in the current Handbook. I am conversant with such Rules and Regulations and undertake to abide by them and to participate in the Drug Testing Programme whenever required to do so. I am at present not under suspension by Cycling Time Trials or any organisation with which Cycling Time Trials has an agreement. I accept the decision of the promoter in all the matters concerning the event and my participation in it subject to such rights of appeal or review as may be provided for in the Rules and Regulations of Cycling Time Trials.
I understand that the event is held wholly or in part on public or private property or the public highway. That I participate therein at my own risk and that no liability whatsoever shall attach to the property owner or anyone devolving an interest in the property there under, the promoting club, its officers, officials, helpers in the conduct of the event, Cycling Time Trials or any club affiliated thereto or any member of such club or any injury loss or damage suffered by me in or by reason of the event howsoever such may be caused and whether by negligence or otherwise. I confirm that I will observe the particular rules and conditions of this event of which I have been informed.

I CONFIRM THAT I HAVE READ ALL THE SAFETY INSTRUCTIONS CONTAINED IN THE START SHEET AND/OR DISPLAYED AT THE SIGNING-ON POINT. I ALSO UNDERSTAND THAT CYCLING TIME TRIALS RECOMMENDS THAT I WEAR A HARD SHELL HELMET THAT MEETS AN INTERNATIONALLY ACCEPTED SAFETY STANDARD.

No	Name & Address	Emergency Tel.	Club	Age	Signature