



# SELF-SCRUTINEERING FORM

## CROSS COUNTRY MOTORCYCLE, QUAD & ENDURO

PLEASE COMPLETE AND HAND IN AT DOCUMENTATION

**COMPETITOR NAME:**

**COMPETITOR RACE NUMBER:**

MOTORCYCLE	TICK
Regulation Competition Numbers	
Sponsors Decals	
Ball Ended Clutch & Brake Levers	
Kill Switch	
Spokes	
Wheel Bearings	
Tyres & Rims	
Exhaust / Silencer Secure	
Electric Start	
Kick Start	
Operatig Brakes Front and Rear Wheels	
Self Closing Throttle	
Adequate Mudguards & Secure	
Folding Footpegs - Not for Quads	
Fuel Tank Secure No Fuel Leaks	

**CLASS:**

**ENGINE NUMBER:**

**FRAME NUMBER:**

RIDING KIT	TICK
Motocross Full Face Type Helmet	
Gloves	
Long Sleeved Jersey	
Upper Body Armour	
Motocross Type Boots	
Motocross Type Pants	

ENVIRONMENTAL & SAFETY	TICK
Fire Extinguisher (minimum 2.5kg)	
Environmental Mat	
Exhaust Noise (within permissible limits)	

PERSONAL SAFETY	TICK
One Litre Drinking Fluid	
Compliant First Aid Kit	
Space Blanket	
Copy ID & Medical Insurance	
Medical Board	

QUAD AS ABOVE and including	TICK
Nerf Bars	
Yellow Light	
Dead Man Kill Switch	

DECLARATION/UNDERTAKING OF COMPLIANCE IN ACCORDANCE WITH GCR 93 (iii)

I DECLARE THAT THE ABOVE MACHINE AND EQUIPMENT COMPLY WITH THE RELEVANT REQUIREMENTS, GCR'S, SSR'S AND SR'S AS LAID OUT IN THE MSA HANDBOOKS PERTAINING TO THIS EVENT. I FURTHER AGREE TO BE BOUND BY THE GCR'S, SSR'S AND SR'S IF IT IS FOUND THAT THE MACHINE AND/OR EQUIPMENT DOES NOT COMPLY OR THAT A FALSE DECLARATION HAS BEEN MADE BY ME.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

THIS FORM MUST BE PRESENTED AT DOCUMENTATION