



Off Road Association of New Zealand

Email:
Website: www.oranz.co.nz

Waiver to Return to Competition After Injury

Event:.....

Date:.....

Name:.....

Declaration:

I declare that I, the above named applicant am not suffering from an injury of any kind which is likely to detrimentally affect the control of my vehicle or my fitness to drive.

If during the course of the race any health issues should arise which could affect my ability to control my vehicle I will cease racing immediately.

Signed:

Date:/...../.....