



CHECK LIST – documents required to accompany Drivers License Application.

Applicant under 19 years old.	Applicant, over 49 years old.
 ASN Canada Medical History Self Declaration completed and signed by the parent or legal guardian. Annual Parental Consent Waiver signed by parents or legal guardians. Minor Participant Waiver signed by the applicant and witnessed. Driver's License Application signed by the applicant, the parent/guardian and two members of the club license committee. 	 BCKCA Medical Examination completed and signed on 2 pages by a physician within the current or previous year (within 2 years). Driver's License Application signed by the applicant and two members of the club license committee. Note: Drivers should retain a copy of their Medical Examination to be used in the following year if it is valid.
Applicant 19 to 49 years old.	
 ASN Canada Medical History Self Declaration completed and signed by the parent or legal guardian. Driver's License Application signed by the applicant and two members of the club license committee. 	

Note: Drivers are required to keep photocopies of all signed license applications, medical forms, insurance waivers and parental consent forms as their interim license and evidence of compliance.

BCKCA

BC KART CLUB ASSOCIATION

DRIVER'S LICENSE APPLICATION

AND LICENSE UPGRADE FORM



		Birthdate: m	d y	Age
SS		Telephones: Hon	ne	
		Work	Fax	
	_Postal	Email		
Club	Rookie	: YesNo	Expiry date_	60 DAYS
ation for New Lie	censeor License	• Upgrade from a	License to	License.
by apply for a BC	KCA license under ti	ne following catego	ry (mark with "X	<u>")</u>
<u>E AGE</u>	CLASS OF KART			COST
15/16+	InterContinental A (ICA), Formula 80 Senior All senior classes not identified for grade A or B+. Junior 3 level - Formula 80 Junior, Junior ICA, Formula			\$30.00 \$30.00 \$30.00 \$10.00
10-12	Junior 2 level - Cana Rotax Minimax, F100 Formula 60 Junior	da Jr., World Formul JJ	· · ·	\$10.00 \$10.00 \$10.00
	eSS Club cation for New Lio by apply for a BC DE AGE 15/16+ 15/16+ 12-15 9/10-15 10-12	PostalPostal ClubRookie cation for New Licenseor License by apply for a BCKCA license under th DE AGE CLASS OF KART 15/16+ Formula C, InterCont 15/16+ InterContinental A (IC 15/16+ All senior classes not 12-15 Junior 3 level - Formula Rotax 125 Junior, Fo 9/10-15 Junior 2 level - Canar Rotax Minimax, F100 10-12 Formula 60 Junior	ess Telephones: Hon Work Work Postal Email Postal Email club Rookie: Yes cation for New License or License Upgrade from a by apply for a BCKCA license under the following catego DE AGE 15/16+ Formula C, InterContinental C (ICC), Forr 15/16+ InterContinental A (ICA), Formula 80 Sen 15/16+ All senior classes not identified for grade 12-15 Junior 3 level - Formula 80 Junior, Junior Rotax 125 Junior, Formula 125 WC Spec 9/10-15 Junior 2 level - Canada Jr., World Formul Rotax Minimax, F100J To-12	Ess Telephones: Home Work Fax Postal Email Postal Rookie: Yes No Club Rookie: Yes No Expiry date cation for New License or License Upgrade from a License to by apply for a BCKCA license under the following category (mark with "X DE AGE CLASS OF KART 15/16+ InterContinental A (ICA), Formula 80 Senior 15/16+ All senior classes not identified for grade A or B+. 12-15 Junior 3 level - Formula 80 Junior, Junior ICA, Formula Rotax 125 Junior, Formula 125 WC Spec (TAG) Junior 9/10-15 Junior 2 level - Canada Jr., World Formula Jr., Formula Rotax Minimax, F100J 10-12 Formula 60 Junior

Junior Upgrade \$ 10.00 Junior to Senior \$ 20.00 Senior Upgrade \$ 10.00

To the Parent/Guardian of a Kart Racer Applicant Under the Age of Nineteen:

If a kart racer is under the age of nineteen when applying for a BCKCA license, a parent or legal guardian, must submit all information required in this document, as well as the "Parental Consent, Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement" and the "Minor's Assumption or Risk Acknowledgement". By their signature, the Parent or Guardian agrees to assure that the minor applying for this license has read and fully understands 1.) this application form, 2.) the Parental Consent, Release and Waiver of Liability, Agreement. 3.) the Minor's Assumption or Risk Acknowledgement. 4.) the General Karting Competition Regulations of ASN Canada FIA and 5.) any other appropriate forms and rules which may be required during the course of licensed competition activities. All of the above documents must be fully completed, understood and properly signed.

Upon acceptance of this application and issuance of a competition license by BCKCA, the undersigned hereby agrees to be bound by the General Competition and Technical Regulations of ASN Canada FIA, BCKCA and your member Club.

Signature of Applicant		Date: <u>m</u>	d	у	
Signature of Parent/Guard	lian		Date: <u>m</u>	d	у
Club License Committee (Two Signatures required)	Member	Memb	er		

IMPORTANT – Driver to keep a duplicate signed copy of this form as the temporary license until the license is issued by BCKCA. Application must be accompanied by copies of all required medical, consent and waiver documents.





BCKCA Driver's License Medical Examination Policy.

Effective Date: March 7, 2009

- 1. BCKCA Regional License Applicants under 49 years of age are required to submit a completed ASN Canada FIA Medical History Self-Declaration signed by the applicant and, for applicants under 19 years of age, a parent or legal guardian.
 - a) BCKCA or ASN Canada FIA reserves the right to request a medical examination by a physician from a license applicant at any time. Costs for any examination to be the responsibility of the applicant.
- 2. BCKCA Regional License Applicants over 49 years of age are required to submit a ASN Canada FIA/BCKCA Physical Examination Form completed and signed on two pages by a licensed physician within the current or previous year.
 - a) BCKCA or ASN Canada FIA reserves the right to request a medical examination by a physician from a license applicant at any time. Costs for any examination to be the responsibility of the applicant.
- 3. **All License applicants** are referred to the ASN Canada FIA Medical Policy (section 4.11) which may be accessed from the ASN Canada FIA website (<u>www.asncanada.com</u>).



Medical History Self-Declaration for an ASN Canada FIA Competition Licence

All National Licence applicants are required to pass a medical examination by a physician as follows:

- At the time of a first-time licence application if no previous medical examination has been done or a medical examination is due.
- Every five (5) years for applicants 11 to 35 years of age.
- Every two (2) years for applicants 36 to 59 years of age.
- Every year for applicants 60 years of age and older.
- Applicants require a medical self-declaration (this form) in the years in which a medical examination by a physician is not required.
- ASN Canada FIA reserves the right to request a medical examination by a physician from a licence applicant at any time.

Applicants for International grades of Competition Licence are required to pass an annual medical examination. International licence applicants 45 years of age and over must pass a stress-related electrocardiogram test initially and every 2 years thereafter.

Competition Licence Applicant Information

	Please PRINT IN BLOCK letters		
Name:	Age:		
Address:	Date of Birth:		
City/Province:	Postal Code		
Occupation:	Gender	М	F 🗌

Applicant's Medical Self-Declaration

Have you been treated for, have you ever had, or have you now, any of the following: (Yes responses should be explained on a separate sheet and attached when submitted)

Conditions:	Yes	No	Conditions:	Yes	No
Frequent or severe headaches			Hay fever		
Unconsciousness for any reason			Eye trouble (except glasses)		
Dizziness or fainting spells			Asthma		
Epilepsy or Seizures			Diabetes		
Heart Trouble			Anemia, or other blood diseases including abnormal		
Coronary Artery Disease or Angina			bleeding		
Valve disease			Admission to a hospital in the past 12 months		
Left Bundle Brach Block			Amputations / Physical disability		
Abnormal Cardiac Rhythms			Previous denial(s) from ASN due to a medical		
High Blood Pressure			reason(s)		-
Psychiatric/Mental Health Problems			Any drug, narcotic or alcohol problems		
			Previous medical exception from ASN		
Operation(s) involving Eyes, Brain, Heart, Nerves, Blood Vessels, or Bones			Illness(s) not mentioned here:		

Date of last Tetanus: _____

Any known medical conditions which could affect your ability to compete must be immediately reported to ASN Canada FIA

Comments:

This is to certify that these statements are true and a any information to ASN Canada FIA.	ccurate. I also give permission to any hos	spital, institution, or physician, to furnish					
Applicant's Signature:	_ Print name	Date:					
Signature of Parent/Guardian if applicant is under the age of majority:							
Parent/Guardian Signature:	Print name	_ Date:					

ASN Canada FIA/BCKCA

PHYSICAL EXAMINATION FORM FOR ASN Canada FIA/BCKCA COMPETITION LICENCE

Dear Doctor,

You are being asked to examine this candidate for a racing licence for the ASN Canada FIA. If you find the candidate physically and psychologically fit, and they pass their other tests, the candidate will then be granted a licence that will enable them to drive a competition vehicle at extremely high speeds under the most exacting conditions. Please, therefore, examine the candidate carefully and critically, and recommend them only if you are completely satisfied in all respects.

You will thus be doing not only the applicant, but also our sport, a service by conducting this examination as carefully as possible.

The following is an excerpt from our regulations outlining the minimum standards required in a medical examination:

- 1.4 Eyesight standards required
 - Visual acuity (before or after correction, sight for each eye should be at least 20/40.) Furthermore, any subject whose visual acuity in one eye only is diminished and cannot be corrected and who necessarily has controlateral vision, whether corrected or not, equal to or greater than 20/20, may obtain a driver's licence under the following conditions and after examination by a competent ophthalmic specialist:
 - Field of vision equal to or greater than 200°
 - Functional stereoscopic vision
 - Condition of the fundus excluding pigmentary retinal damage
 - Any old or congenital damage shall be strictly unilateral

Blindness in one eye is absolutely excluded

- b) Normal binocular vision
- c) Normal colour vision (recourse to the Ishihara tables in doubtful cases and to the Beyne Lantern, or a similar system in cases of error); in any case, no errors in the perception of the colours of the flags used in international competitions
- d) Normal field of vision
- e) Normal stereoscopic vision (licence should not be issued to applicants who are blind in one eye).
- f) The wearing of contact lenses is permitted provided that:
 - These shall have been worn for a period longer than 12 months and for a significant period every day
 - They are certified as satisfactory for motor racing by the ophthalmic specialist who supplied them (hard contacts are not recommended)
- 1.5 List of illnesses and disabilities incompatible with the practice of motor sport or requiring a medical assessment by a physician approved by the ASN.
 - a) Incompatible illnesses and disabilities
 - Epilepsy with behavioural effects, or under treatment
 - Amputations, except in the case of fingers where the gripping function in both hands is unimpaired
 - Orthopedic appliances, if the functional result is not equal or near to normal
 - Free movement of the limbs impeded by more than 50%
 - b) Illnesses or disabilities requiring a medical assessment by the ASN:
 - Insulin-dependent diabetes, on condition that a document is provided to ASN Canada FIA signed by a medical doctor specializing in diabetes or internal medicine proving the regular supervision of the party concerned and of their treatments.
 - Myocardial infarction and myocardial ischaemia, valvular disease or other abnormal cardiovascular conditions
 - Functional limitation of the articulations of the hand superior to 50% and affecting two or more fingers of the same hand
 - Orthopedic appliance allowing the party concerned to recover normal or near normal functional activity
 - Psychiatric conditions

Date m:_____d:____y:____

Signed:_____

ASN Canada FIA/BCKCA

PHYSICAL EXAMINATION FORM FOR ASN Canada FIA/BCKCA COMPETITION LICENCE

Ар	plicants Personal Information			
Na	me:	Age:		
	dress:	Date of Birth:		
	y/Province:	Postal Code		
Oc	cupation:	Gender:	М 🗌	F 🗌
Re	 Examination: It shall be the responsibility of the applicant to be re-examined as follows 1. Upon the expiration of their current medical examination form as requ 2. Following any significant illness, injury or hospitalization. 		npetition rules.	
Ex	amining Physician's Report			
1.	Name, address, and telephone number of examining Doctor, affix your stamp in the box.			
2.	Is there any evidence of abnormality of the heart or cardiovascular	Yes 🗌	No 🗆	
Ζ.	system? (If yes supply details)			
	NOTE: ECG recommended, but not required, for kart drivers 45 and over	ECG Date:		
3.	Is there any evidence of a physical or mental condition, past or present which could, in your opinion, debar the applicant from holding a motor sport competition licence? (If yes supply details)	Yes 🗌	No 🗌	
4.	Does the applicant have any physical abnormality or restriction of movement of upper and or lower limbs? (If yes supply details)	Yes 🗌	No 🗌	
5.	Vision - Uncorrected	R eye 20/	L eye 20/	
	- Corrected	R eye 20/	L eye 20/	
	- Field of vision		_	
	- Is colour vision normal? (If no supply details)	Yes 🗌	No 🗌	
6.	Blood Pressure (If outside normal provide details)	Diastolic -	Systolic -	
7.	Tetanus Booster	Date:		

The applicant should have no established medical history or clinical diagnosis that may reasonably be expected, within 2 years after this finding, to make them unable to perform the duties or exercise the privileges of an ASN Canada FIA competition licence.

On the basis of the above report, and mindful of the information provided to me, I make the following recommendation:

That the applicant is physically and psychologically fit to drive a racing vehicle in competitive events at high speeds.

That the applicant is NOT physically and psychologically fit to drive a racing vehicle in competitive events at high speeds.

Date: M:_____ D:____ Y:____

Signed: ______ M.D.