



DIVERS CAPSULE CHECK

1st check	2nd check

DIVER NOTES:

Not Passed:

Comments: _____

Passed:

Capsule Dunk Test:

Signed by VDBC Official Diver

Diver Print Name:

Print Name VDBC Official Inspector:

Signed by VDBC Official Inspector:

USE THIS SECTION IF BOAT FAILS INSPECTION

(Form given to driver to complete repairs and must be returned with boat showing repairs complete)

Description of Rejection:

The above rejected items will be repaired to the satisfaction of the inspector before this entry enters the water for a competition pass or entrant will be subject to immediate disqualification.

Signed by VDBC Inspector

Drivers Signature

INDEMNITY

I, the undersigned, realise that Drag Boat Racing is dangerous.

I do not rely on officials or this technical check sheet for the safety of the boat or my equipment, and realise this is my responsibility and that safety or other equipment can not guarantee my boats safety. If I have taken the decision to use a boat fitted with a capsule/cell or a belt restraint or a combination of both. I personally have examined these items fitted to the boat and use them totally at my own risk and at my choice and realise that these may make the boat more dangerous in certain conditions.

I, on behalf of myself, and my heirs or any other person, release all persons, and organizations connected with the running, supervision or administration of the event from any responsibility whatsoever, however caused. I sign this indemnity without duress or pressure, and in the full knowledge that I may be giving up certain legal rights.

In consideration for having been provided technical inspection and for being allowed to compete in the event, I affirm that I have read and understood all VDBC rules and regulations, including those contained in the APBA rule book, with specific reference but not limited to the rules, regulations and agreements contained in the administration procedures and appeal section and I agree to be bound by all such rules, regulations and agreements.

Signed by Driver:

Date:

Witnessed by: (Signature)

Witness to print name:

NO SMOKING AROUND BOATS