

Official's Licence Application

It is the responsibility of the Applicant to provide all required information

All Applicants must submit the following:

- Completed Application Form
- Copy of most recent or current Official's licence held.
- Resume of events or Log Card.
- A high-resolution head shot photo in JPEG Format.
- Officials Code of Conduct

Note to All Applicants

- Licences are valid from date of issue to December 31 of the calendar year. Licence Fees are not pro-rated
- It is the responsibility of the Applicant to provide accurate information when applying for a licence.
- Licences will not be issued if all required documentation is not submitted with this application.
- Sports Development Group (GDS) has the right to refuse any application for not meeting the criteria as stated in the Criteria for a Competition Licence, as well if the required documentation stated above is not received.
- Sports Development Group (GDS) has the right to share information with affiliated Regions, Clubs and any Sports Development Group (GDS) commissions including the National Medical Committee.

Personal Information:

Name: _____

Address: _____ City: _____

Province: _____ Postal Code: _____

Cell Phone: _____ Business Phone: _____

Email: _____ Language: French English

Nationality: (As per Passport if not a Canadian or a Landed Resident): _____

Last/Current Official's Licence (state year and which body issued it): _____

Licence Number of previously held licence: _____

Affiliated Club or Series: _____

Letters of Permissions/ Visas Required:

Officials who are partaking in a competition outside of Canada, may be requested to provide a letter of Permission. Typically, these are issued for officials who enter in an international competition that is listed on the FIA International Sporting Calendar.

To provide the letter requested, please complete the below information. If there is not enough space to list the events, please email licensing@asncanada.com to discuss your situation.

Name of Series/Event _____

Location of Event _____

Date of Event _____

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Official Licence Selection:

RACE	
Licence Type	Grade Requested
Steward	
Race Director	
Deputy Race Director	
Clerk of the Course	
Deputy Clerk of the Course	
Chief Medical Officer	
Deputy Medical Officer	
Secretary of the Event	
Chief Marshal	
Chief Pitlane Marshal	
Chief Timekeeper	
Deputy Timekeeper	
Chief Scrutineer	
Deputy Scrutineer	
Grid Marshal	
KART	
Steward	
Race Director	
Timekeeper	
Technical Inspector	
Race Control Recorder	
Grid Marshal	

International Licence Grades Defined:

Grade	Applicant Information	Validity of Licence
A	Officials designated by a series, ASN, or Region and currently holding or have held a B licence in the previous year	Officials participating in International Competitions except for positions requiring an FIA International Licence
B	Officials designated by a series, ASN, or Region and currently holding or have held a C licence in the previous year	Officials participating in National Competitions, and International Competitions under supervision
C	Officials designated by a series, ASN, or Region and currently holding or have held a Regional Licence	Officials participating in National Competitions under supervision

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Declaration

1. I agree that a competition licence granted by ASN for Canada is a privilege and not a right.
2. I have read, understood and will comply with the "Documentation Required with Licence Application", and further understand that any false information given by me in this application may lead to disciplinary action and the possible permanent withdrawal of my licence.
3. I agree that I will do nothing, including all forms of social media, to bring motor sport into disrepute nor commit any act prejudicial to the interest of motor sport generally and understand that, should I do so, disciplinary action maybe taken against me.
4. I undertake not to use any drug considered illegal, or to consume alcohol, or to partake of any legal, during any competition in which I am taking part.

Applicant Signature: _____ **Date:** _____

If the applicant is under the legal age of majority in the province of residence a Parent/Guardian must also sign below, stating relationship.

Parent/Guardian Name: _____ **Relationship** _____
Parent/Guardian Signature _____ **Date** _____

FOR INTERNATIONAL LICENCE APPLICANTS:

FIA World Accident Database Declaration of Consent

If the licence-holder who is the subject of this application is involved in an accident during a motor sport competition, the licencing authority (the ASN) may be required to submit personal or medical data relating to the circumstances of the accident to the FIA World Accident Database ("WADB").

Accident Data collected for the purpose of processing through the WADB shall be neither submitted nor so processed unless the Data Subject has expressly consented to this in the following, or equivalent, terms and that consent has been communicated to the Data Controller.

I, the undersigned Applicant, expressly consent to the collection, use and processing of data related to myself, including personal and sensitive data (such as medical information) in relation to my involvement in a motor sport accident or incident and related ONLY to the circumstances of the accident or incident and its immediate outcome, including any injuries suffered, by an appropriately authorised person representing the FIA or the National Sporting Authority. I, the undersigned Applicant, agree that said data may be stored electronically, even after the expiration of my licence, and may be used at any time, for the sole purpose of research in support of improving safety in motor sport competitions, during and after the validity period of my licence, on the World Motor Sport Accident Database ("WADB"). I, the undersigned Applicant, acknowledge that I have read and fully understood the WADB Guide published by the FIA, which provides for further information about such data collection and processing, including the conditions under which I may request access to my personal data, its rectification or suppression, and object, on legitimate grounds, to its processing.

By checking this box and signing below I, the undersigned Applicant, confirm that **I UNDERSTAND AND I ACCEPT** the present WADB Declaration of Consent.

By checking this box and signing below I, the undersigned Applicant, confirm that **I DO NOT ACCEPT** the present WADB Declaration of Consent.

Applicant Signature: _____ **Date:** _____