

AIDKA MEDICAL CLEARANCE FORM

If you have answered "yes" to any of the following questions 1-11 on the online AIDKA licence application, and you are applying for a licence to drive a go-kart you are required to have your Doctor complete the medical clearance below.

If your licence application requires a medical clearance it will not be processed until that clearance is received.

None of these items will necessarily preclude you from holding a licence, but it is a safety requirement that the information above is disclosed.

Once this form is completed, please post it to the following addresses (depending on the location of the club you are joining).

South Australia and Queensland.

Jayne Gelston PO Box 3117 Renmark SA 5341.

Western Australia and Northern Territory.

Nicki Morrell 172 Morrell Road Authur River WA 6315

AIDKA Medical Declaration:						
Statement by Applicant						
1 Have you ever been declined life insurance on medical grounds?						
2 Are you required to take a state roads or traffic authority medical examination to obtain a motor vehicle licence?						
Have you ever suffered, been diagnosed or had treatment for:-						
3 Any medical or surgical conditions that could interfere with the fine movements of your arms and legs?						
4 A psychiatric or psychological illness?						
5 Persistent or severe headache, head injury, epilepsy, seizure, fainting or giddiness?						
6 Heart or lung disease, blood vessel disease, hypertension, coronary bypass or other major surgical procedure?						
7 Cancer, kidney, bladder, diabetes, gastrointestinal, thyroid or blood disorders: including any surgical procedure?						
8 A significant illness, injury or surgery not listed?						
9 Any ear disorder that may affect your balance including tinnitus?						
10 Eyesight impaired for distance vision to such an extent that it cannot be corrected?						
11 Are you taking any injections, tablets or other forms of medication?						
12. Are you required to wear spectacles to correct distance vision?						
13. Are you on Work Cover/Workers Compensation? (If YES, drivers are not permitted to race)						

Declaration:

- a. I certify that the statements made to AIDKA regarding my physiological and physical condition and any previous illness are true and correct.
- b. I declare that should any of the above conditions become evident during the currency of this licence, I agree to abstain from exercising the privileges, will notify AIDKA and submit to a further medical examination the results of which are to be forwarded to the AIDKA Secretary.
- c. I undertake not to use medication or drugs that might be considered illegal within a period of 24 hours prior to a race competition on or participation of any sort.

Applicant Signature	Date	

An Applicant making a false declaration is liable to refusal/cancellation of their licence

Medical Clearance to Race a Go Kart (to be completed by your Doctor/Physician ONLY if required) See Above:						
Medical Clearance to Race a Go Kart (to be completed by your Doctor/Physician ONLY if required) See Above						
Doctor/Physician Name:	Telephone No:					
Doctor/Physician Address		Doctor's Stamp				
Having Examined	(Applicant's Name)					
Who I understand is applying for an AIDKA Licence to race Go Kart, in my opinion,						
There are no medical conditions that would detrimentally affect his/her ability to control/drive a Go Kart						