

BMW CCA PUGET SOUND REGION TECH INSPECTION

Your car must be inspected prior to the Driving School. Take your car to a qualified mechanic (ASE certified) for tech inspection, checklist sign-off *AND STAMPED* in the current year of the event. The Driver's School participant is solely responsible for the condition of the vehicle to be driven during this event.



BMW Car Club
of America
Puget Sound Region

If you arrive at the track without a completed tech inspection form, you will not be permitted to run.

TECHNICAL INSPECTION CHECKLIST

DRIVER NAME _____

CAR MAKE _____ MODEL _____ YEAR _____ LICENSE PLATE# _____

<u>Pass</u>	<u>Fail</u>	<u>ENGINE COMPARTMENT/DRIVELINE</u>	<u>Pass</u>	<u>Fail</u>	
___	___	Fan belts OK, tight, no cracks	___	___	Hoses secure & flexible, no cracks/rubbing
___	___	Engine mounts solid	___	___	Battery secure, lugs tight
___	___	Throttle linkage OK	___	___	Two throttle return springs
___	___	Guibo and center support bearing OK	___	___	Fluid levels OK (incl trans and diff), no leaks
___	___	Header and exhaust OK	___	___	Brake fluid full and fresh (Age of brake fluid...12 Months or less w/ documented proof)
<u>TIRES/SUSPENSION</u>					
___	___	Tires in good condition; even wear, adequate tread, no sidewall bubbles, cracking, cords or belts showing	___	___	Wheel bearings, ball joints tight
___	___	Springs and shocks OK	___	___	Brake pads and shoes OK (minimum 35%)
___	___	Front strut mounting locations & hardware OK	___	___	Rear unibody subframe & differential mounts OK
___	___	Cross members (front and rear) free of visually obvious cracks	___	___	Wheels free of visually obvious cracks
<u>INTERIOR</u>					
___	___	Steering wheel play OK	___	___	Driver & pass. seat & belt in good working order
___	___	Pedal check OK			

Overall Condition: Pass ___ Fail ___ INSPECTED BY _____ AT _____ DATE _____	<i>Stamp here with mechanic business name or return address stamp (or attach a copy of receipt from inspection)</i>
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RESPONSIBILITY STATEMENT – BMW CCA PUGET SOUND REGION

This is not a racing school. It is a high speed driving school, on a track, under close supervision by instructors. While the overriding consideration during the operation of the event is safety, incidents may occur that could cause vehicle damage and/or personal injury. You will be driving in a class session with other students and instructors whose vehicles may be uninsured and/or unregistered.

You are totally responsible for the safe operation and safe mechanical condition of your vehicle. BMW CCA Puget Sound Region, its officers, instructors, staff and facility providers assume no responsibility in the event of an accident, of any kind, in the course of this event. The undersigned assumes all risks and hazards incidental to participating in this high speed driving school, whether foreseen or unforeseen, and does hereby waive, release, absolve, indemnify and agree to hold harmless the BMW CCA Puget Sound Region, its officers, instructors, staff and facility for any claim of any kind for damage or injury to his/herself, his/her personal property, including his/her vehicle, or damage to any other person, personal property or vehicle.

If this is of concern to you we recommend that you contact your own personal insurance carrier for advice to determine what coverage would be in effect during this school.

Submission of this application is your acknowledgment of the above and agreement to attend under these conditions.

I hereby certify that the vehicle specified on the technical inspection checklist form, that I have provided at registration, has been carefully examined by a qualified mechanic (ASE certified) and that all the items specified on the technical inspection checklist have been inspected. I understand that the safe condition and operation of the vehicle specified on my technical inspection checklist form is entirely my responsibility as well as any problems, malfunctions or damage that occur in connection with the operation of the specified vehicle prior to, during and subsequent to the driving school.

DRIVER SIGNATURE _____

DATE _____