



# FIVE CLUBS WISCOMBE

ENTRY FORM - SATURDAY 7<sup>TH</sup>/SUNDAY 8<sup>TH</sup> SEPTEMBER 2013

Held under the General Regulations of the Motor Sports Association (Incorporating the provisions of the International Sporting Code of the FIA).

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Evening Telephone No \_\_\_\_\_ Email \_\_\_\_\_

Competition Licence No \_\_\_\_\_ Grade & Category of Licence \_\_\_\_\_

Do you hold, or have ever held, a valid Road Traffic Act driving licence YES/NO

**Car Details:**

Make & Model: \_\_\_\_\_

Capacity: \_\_\_\_\_ cc Super/Turbo Charged: YES / NO

Engine Type: Car / Motor Cycle

Will the car be running on pump fuel: YES / NO If NO please state fuel used:

Please circle your Event Class below for both or your chosen day:

**A1 A2 A3 A4 B1 B2 B3 C1 C2 C3 C4 C5 C6 D1 D2 D3 D4 E1 E2 E3 E4 T1**

**SATURDAY: DEWS**

**A1 A2 A3 A4 B1 B2 B3 C1 C2 C3 C4 C5 C6 D1 D2 D3 D4 E1 E2 E3 E4**

**SUNDAY: DEWS**

For Saturday, I am a fully paid up member of \_\_\_\_\_ *Please only state one per day* Motor Club  
 For Sunday, I am a fully paid up member of \_\_\_\_\_ *Please only state one per day* Motor Club

I am a Registered contender in the	SATURDAY	SUNDAY
2013 Revington TR/TR Register Sprint & Hillclimb Championship	YES/NO	N/A
2013 Bridge Tyres & Wheels Point 'S' Wiscombe Hillclimb Championship	YES/NO	YES/NO
2013 ACSMC Hillclimb Championship	YES/NO	YES/NO
2013 Trident Engineering Welsh Sprint & Hillclimb Championship	YES/NO	YES/NO
2013 Bridge Tyres & Wheels Point 'S' ASWMC Hillclimb Championship	YES/NO	YES/NO
The Service Hydraulics Speed Championship (formerly Midland Speed)	N/A	YES/NO

Car will also be driven by (separate Entry Form required) \_\_\_\_\_

Please indicate which driver is to be the "a" (2<sup>nd</sup>) driver \_\_\_\_\_

I enclose Cheque/Postal Order made payable to "FIVE CLUBS HILLCLIMB". £ \_\_\_\_\_

**PLEASE ALSO READ, COMPLETE and SIGN ON REVERSE SIDE.**

# FIVE CLUBS WISCOMBE

## SATURDAY 7<sup>TH</sup>/SUNDAY 8<sup>TH</sup> SEPTEMBER 2013

THE FOLLOWING INDEMNITY MUST BE SIGNED BY THE DRIVER

I declare that I have been given an opportunity to read the General Regulations of the Motor Sports Association and, if any, the Supplementary Regulations for this event and agree to be bound by them. I declare that I am physically and mentally fit to take part in the event and I am competent to do so. I acknowledge that I understand the nature and type of the competition and the potential risk inherent with motor sport and agree to accept that risk. Further I understand that all persons having any connection with the promotion and/or organisation and/or conduct of the event are insured against loss or injury caused through their negligence. State your age (BELOW) if you are under 18 . . .

I declare that to the best of my belief the driver(s) possess(es) the standard of competence necessary for an event of the type to which this entry relates and that the vehicle entered is suitable and roadworthy for the event having regard to the course and the speeds which will be reached.

I understand that should I at any time of this event be suffering from any disability whether permanent or temporary which is likely to affect prejudicially my normal control of the vehicle, I may not take part unless I have declared such disability to the ASN, who have, following such declaration, issued a licence which permits me to do so.

DRIVER  
Signature \_\_\_\_\_ Date \_\_\_\_\_ DOB \_\_\_\_\_

THIS FORM MUST BE COUNTERSIGNED BY THE PARENT OR GUARDIAN (AS APPROPRIATE) IF DRIVER IS UNDER 18 YEARS OF AGE.

If I am the Parent/Guardian/Guarantor of the driver 'I understand that I shall have the right to be present during any procedure being carried out under the Supplementary Regulations issued for this event and the General Regulations of the MSA' As the Parent/Guardian/Guarantor 'I confirm that I have acquainted myself with the MSA General Regulations, agree to pay any appropriate charges and fees pursuant to those Regulations (to include any appendices thereto) and hereby agree to be bound by those Regulations and submit myself without reserve to the consequences resulting from those regulations (and any subsequent alterations thereof). Further, I agree to pay as liquidated damages any fines imposed upon me up to the maximum set out in Section Z'

Note: Where the Parent/Guardian/Guarantor is not present there must be a representative who must produce a written and signed authorisation to so act from the Parent/Guardian/Guarantor as appropriate.

Full Name \_\_\_\_\_ Relationship to Driver/Entrant \_\_\_\_\_

Address \_\_\_\_\_

Telephone No \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### NAME & ADDRESS OF PERSON TO BE CONTACTED IN CASE OF SERIOUS ACCIDENT.

Name \_\_\_\_\_ Relationship to Competitor \_\_\_\_\_

Address \_\_\_\_\_

Telephone No \_\_\_\_\_ Will the above contact be at the venue: \_\_\_\_\_ Yes / No \_\_\_\_\_