

STAFFORDSHIRE KNOTT AUTOTEST 2017 ENTRY FORM

Driver \_\_\_\_\_ Comp Lic No \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

Tel No (home) \_\_\_\_\_ (work) \_\_\_\_\_ (Mob) \_\_\_\_\_

Final instructions, results etc will be emailed, unless requested otherwise

Email \_\_\_\_\_

Club \_\_\_\_\_

I hold a full RTA Licence \_\_\_\_\_ Yes / No

Link Up Ltd British Autotest Championship \_\_\_\_\_ Yes / No

BTRDA Demon Tweeks Autotest Championship \_\_\_\_\_ Yes / No

ANWCC Autotest Championship \_\_\_\_\_ Yes / No

AWMMC Autotest Championship \_\_\_\_\_ Yes / No

NuCasa BTRDA Allrounders Championship \_\_\_\_\_ Yes / No

CAR DETAILS

Make \_\_\_\_\_ Model \_\_\_\_\_

Capacity cc \_\_\_\_\_ Overall length \_\_\_\_\_

Class Entered \_\_\_\_\_

- A. Saloon cars under 11 ft overall length
- B. Saloon cars over 11 ft overall length
- C. Sports cars and sports kit cars
- D. Specials
- E. Road going series production cars

Entry Fee £30

Please send your completed entry form with the entry fee (cheque/PO payable to WSSCC Ltd)  
Please Sign the Indemnity on the opposite side.

## INDEMNITY

I declare that I have been given the 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.

I understand that motorsport can be dangerous and accidents causing death, injury, disability and property damage can and do happen. I understand that these risks may give rise to my suffering personal injury or other loss and I acknowledge and accept these risks. In consideration of the acceptance of this entry I agree that neither any one of or any combination of the MSA and its associated clubs, the organisers, the track owners or other occupiers, the promoters and their respective officers, servants, representatives and agents (the "Parties") shall have any liability for loss or damage which may be sustained or incurred by me as a result of participation in the Event, including but not limited to damage to property, economic loss, consequential loss or financial loss howsoever caused. Nothing in this clause is intended to or shall be deemed to exclude or limit liability for death or personal injury. To the fullest extent permitted by law I agree to indemnify and hold harmless each of the Parties in respect of any loss or damage whatsoever and howsoever arising from my participation in this event. I declare that to the best of my belief the driver possesses 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.

Driver's Signature \_\_\_\_\_ Age (if under 18 yrs) \_\_\_\_\_

Date \_\_\_\_\_

Person to contact in case of a serious accident;

Contact for driver \_\_\_\_\_ Tel No \_\_\_\_\_

Address \_\_\_\_\_

If the driver is under 18 years of age this form must be countersigned by the appropriate Parent/Guardian/Guarantor.

I understand that I shall have the right to be present during any procedure being carried out under the Supplementary Regulations issued for the event and the General Regulations of the MSA.

As the Parent/Guardian 'I confirm that I have acquainted myself and the minor 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 alteration thereof). Further I agree to pay as liquidated damages any fines imposed upon me to the maxima set out in Part 3, Appendix 1.'

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

Full Name \_\_\_\_\_ Relationship to driver \_\_\_\_\_

Address \_\_\_\_\_

Tel No \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

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