Derwydd PCT 27th September 2015 Entry Form



BLOCK CAPITALS THROUGHOUT PLEASE

National B / Clubman (Please delete as appropriate)

DRIVER	PASSENGER			
NAME	NAME			
Address	Address			
Club	Club			
Club Comp. Licence No	Club			
Tel. No.	Tel. No			
Email	Email			
VEHICLE DETAILS				
Make	Model			
Capacity	Reg. No.			
Class	Colour			
Length				
Delete as appropriate; FWD / RWD / FERWD	/ RERWD / LSD			
Please list all modifications to production form or	reply 'None'			
Correspondence by E-mail; Yes / No (Please selectorrespondence will be sent by post)	et one, where no e-mail address is given all			
CHAMPIONSHIPS				
Driver ANWCC Yes / No Reg No	•••••			
Driver BTRDA Yes / No Reg No				
Glynne Edwards Memorial Championship; Yes / No				
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Please complete this entry form giving all details required as well as signing the declaration. It should be returned with the correct remittance to the Entries Secretary: - $\frac{1}{2}$

Mr. Geraint Richards, ANNED WEN, LLANDRILLO, CORWEN, DENBIGHSHIRE. LL21 OTH

Your details will be stored on a computer to generate entry lists and labels for mailing purposes and will only be used with regard to this event. Please contact the Entries Sec if you object.

DECLARATION OF INDEMNITY 2015

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 and accept the risk.

State your age if you are under 18.....

I agree 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.

If I am the parent or guardian 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 'I confirm that I have acquainted myself and the minor with the MSA General Regulations, and agree to pay any appropriate charges and fees pursuant to those Regulations (to include 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 up 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 to act as their representative.

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

All competitors must comply with the Regulations contained within T.4.1 and attention is drawn to H.33

ENTRANT	DRIVER	PASSENGER		
Sig	Sig	Sig		
Date	Date	Date		
	Next of Kin	Next of Kin		
	Contact No	Contact No		
	Relationship	Relationship		
If entrant, driver, or navigate parent or guardian.	or is under 18, the declar	ation must be countersigned by their		
Name	Name	Name		
Sig	Sig	Sig		
Relationship	Relationship	Relationship		
FEES				
ENTRY FEE National B Event		£25.00*		
ENTRY FEE Clubman Event		£25.00*		
Bala & District Motor Club Membership		£12.00*		
	TOTAL	•••••		
*PLEASE DELETE AS A	APPROPRIATE			

Cheques to be made payable to 'Bala & District Motor Club Ltd'