COVENTRY & WARWICKSHIRE MOTOR CLUB LTD MERCIAN SPORTING TRIAL

Sunday 18th October 2015 ENTRY FORM

DRIVER'S NAME:	
DRIVER'S ADDRESS:	
	.POSTCODE:
TELEPHONE NUMBER: HOME	MOBILE
DRIVER'S EMAIL:	
DRIVER's CLUB:	
LICENSE GRADE / NUMBER:	<i>1</i>
PASSENGER'S NAME:	
PASSENGER's CLUB:	
CAR TYPE:	
CAPACITY: cc	
In case of emergency please contact:	
Name(for driver)	Tel
Name (for Passenger)	Tel

<u>Please return form and relevant ENTRY FEE – see SR 11 (Cheques payable to Coventry & Warwickshire M C) to</u>: - Mike Stephens, Willow Cottage, Bradnocks Marsh Lane, Barston, Solihull B92 0LH.

PLEASE COMPLETE INDEMNITY OVERLEAF.

MERCIAN TRIAL SUNDAY 18TH OCTOBER 2015

INDEMNITY DECLARATION

I declare that I have been given the opportunity to read the General Regulations f 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.

Entrant's Signature:		age if you are			
Driver's Signature:	State your	age if you are			
Passenger's Signature:	State your	age if you are			
Date:					
If either the Entrant and/or the Driver is under 18 Parent/Guardian/Guarantor	years of age, this for	m MUST be co	untersigned by t	he appropriate	
Parent/Guardian/Guarantor of: ENTRAN	T* - or – DRIVER*	*Please o	delete as appropria	te	
This Entry is made with my consent:	Relationship to EN	NTRANT*			
Name:	- or - DRIVER*				
Address:					
	Post Code:				
Home Tel No:	Work Tel No:	el No:			
	Mobile Tel No:				
E-Mail Address:					
If I am the Parent/Guardian/Guarantor of the Driver, I understaunder the Supplementary Regulations issued for this event and			during any procedure	being carried out	
As the Parent/Guardian/Guarantor I confirm I have acquainted to fees pursuant to those Regulations (to include any appendice without reserve to the consequences resulting from those Regulating any fines imposed upon me to the maxima set out in I	es thereto) and hereby ago ulations (and any subseque	ree to be bound by	those Regulations a	and submit myself	
Note: Where the Parent/Guardian/Guarantor is not present, the so act from the Parent/Guardian/Guarantor as appropriate.	ere must be a representativ	ve who must produc	ce a written and signe	ed authorisation to	
Signature of Parent/Guardian/Guarantor:					
If a passenger is under 18, then the Parent/Guardian/Guarant either endorse the Signing-on form on the day, or sign and fill in the items below, or else a letter (T4.1.7) stating event, date, permission, etc must be produced and will be retained.		ne Parent/Guardia i	n/ Guarantor knows v	vhat is happening)	
Signed:	Date:				
Name:				1	
Address:					
	Post Code:			1	
Relationship:				-	