

2011 MDA / BTRDA Clubmans Rallycross Championship



PLEASE WRITE IN BLOCK CAPITALS AND COMPLETE ALL SECTIONS

Held under the General Regulations of The Motor Sports Association (incorporating the pr Sporting Code of the FIA) and these Supplementary Regulations

SECTION E	DRIVER DETAILS								
Driver Name									
Driver Address									
				Postcode					
Licence Grade		Licenc	ce No	ASN					
Date of Birth		Club Mem No		Home Town					
Phone: Home		Work		Mobile					
		WOIR		Mobile					
Email Address Please indicate below any prescribed drugs or conditions which should be notified to the Medical Team									
Please indicate below any prescribed drugs or conditions which should be notified to the Medical Team									
SECTION 2 – V	/EHICLE DETAILS								
		N	Nake of Car						
Car Numl	ber	Tv	ype/Model	сс					
Transponder	No	Class	See Below	Force	ed Induction?				
Super Modified	Stock	Hatch	Mini Cross		Junior				
ouper mounicu			6. 655						
Sponsor Detail	s								
SECTION 3 – E	VENT DETAILS – E	ntry Closing Date is 2 we	eeks prior to the Eve	nt, Late entries will autom	atically incur a £25 late entry fee				
			Entry Fee	BTRDA/MDA Memb	ers				
Catur	rday May 7	Phyton (Night Page)	·	BTRDA/MDA Memb					
Satur	rday May 7	Blyton (Night Race)	£195						
	rday May 7 day August 28 & 29	Blyton (Night Race) Lydden Hill	£195						
Sunday/Mond	, ,		£195						
Sunday/Mond	day August 28 & 29	Lydden Hill	£195 £195		ting at this				
Sunday/Mond	day August 28 & 29 September 18	Lydden Hill Knockhill	£195 £195 £195 £195						
Sunday/Mond Sunday : Sunday	day August 28 & 29 September 18 y October 16	Lydden Hill Knockhill Mallory Park	£195 £195 £195 £195 £105		First time Competing at this circuit				
Sunday/Mond Sunday Sunday 1: I declare that I have be declare that I am physical motor sport and agree to	day August 28 & 29 September 18 y October 16 ten given the opportunity to read to the part in the accept that risk. 2: I declare that accept that risk. 2: I declare that	Lydden Hill Knockhill Mallory Park the General Regulations of the Mothe event and I am competent to do to the best of my belief the driver;	£195 £195 £195 £195 Total otor Sports Association and, it is so. I acknowledge that I ur	f any, the Supplementary Regulation inderstand the nature and type of the of competence necessary for an eve	s for this event and agree to be bound by them. I competition and the potential risk inherent with to fit the type to which this entry relates and that				
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SECTION 4 – NEXT OF KIN									
Nai	me and Address of	Relative to be N	otified in the Event	of a Serious Acc	ident				
Name		Relationship		Telepho	ne				
Address									
SECTION 5 – ENTRANT DE	ETAILS								
Please only complete this section if a Entrant in accordance with MSA Regu		has been issued by	your ASN. If no details	s are entered below,	the 1 st Driver will be nominated as the				
Entrant Name									
Entrants Licence No		ASN	Represer	ntative Name					
Entrant Address									
					Postcode				
Phone: Home		Work		Mobile	2				
Email Address									
1: 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. 2: 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 course and the speeds which will be reached 3: 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. 4: 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 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									
Entrant Signature				Date					
Age if Under 18	Any indemnity and/or declaration as described by the paragraphs above which is signed by a person under the age of 18 shall be countersigned by that person's parents or guardian, whose full name & address is below								
Name of Parent/Guardian			Signature of Pare	ent/Guardian					
Full Address									
SECTION 6 – PAYMENT D	ETAILS								
Cheques to be made payable t	o: LHMC or alterna	tively complete I	Debit/Credit Card d	etails below					
Card Type Debit/Credit	Card No								
Valid From			Expiry Date						
Issue No (debit card only)			Security	y Code (last 3 digits o	n back)				
Name on Card			Signature						
SECTION 7 — NOTES FOR COMPLETION Please ensure that all information is completed as if you do not do so your entry will not be accepted If submitting entry form electronically, please indicate signature by Typing your name in the appropriate box Competitors are reminded that any entry not accompanied by the correct fee is NOT a valid entry SECTION 8 — FOR OFFICE USE ONLY									
Date Received									
Entry Fee Paid			Date						
Method of Payment									