



ENTRY FORM

Gaby Mohr Memorial Car Trial Sunday 12th September 2021

This event is held under the General Regulations of Motorsport UK (incorporating the provisions of the international Sporting Code of the FIA) and the Supplementary Regulations for this event.

What to do with this form.....

1. Print out both pages of this form for each entry.
2. Fill in **CLEARLY** and **FULLY** and sign & date both pages.
3. Scan/photo and **EITHER** email both pages to **gabymohrtrial@hotmail.co.uk**
OR Text/WhatsApp to 07910 835635 by 4pm September 8th latest.
4. Transfer £39 per entry to WSSCC's Barclays Bank account specifying Sort Code 20-97-78
Account 00958352, Account Name: Wolverhampton and South Staffordshire Car Club Ltd.
Please include the reference GMTRIAL followed by your surname, e.g. "GMTRIAL FASTFOX."
5. Covid guidance means that no paper documentation must pass between entrants and officials.

	Entrant	Driver	<i>Passenger</i>
Full name			
Address			
Post code			
Telephone (day)			
Telephone (eve)			
Email address			
Club			
Motorsport UK Lic No			

Class

1, 2, 3, or 8	
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Championships *tick all which apply*

<i>Motorsport UK</i>	<i>BTRDA</i>	<i>BTRDA AR</i>	<i>MSGCC</i>	<i>AWMMC</i>	<i>ANWMC</i>	<i>WAMC</i>

Vehicle

Make	
Model	
CC	
Registration	
Length (classes 1&2 only)	
Standard gearbox & Final drive ratios (classes 1,2,3 only) (Y/N)	
Torque biasing diff or other traction control (Y/N)	

Signature: _____

Date: _____



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Indemnity

I declare that I have been given the opportunity to read the General Regulations of Motorsport UK and 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 that I am competent to do so. I acknowledge that I understand the nature and type of the competition and the potential risk inherent with motorsport and agree to accept that risk. **I agree to adhere to instructions issued by the organisers with regard to Covid-19 risk avoidance.**

	Entrant	Driver	Passenger
Signature			
Date			
Age if under 18			

Declaration of Parent or Guardian (if competitor is under 18)

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 MSUK. I confirm that I have acquainted myself with the MSUK 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.

For:	For Entrant	For Driver	For Passenger
Signature			
Name			
Relationship			
Address			

In all cases please give the name, telephone number and address of a relative or friend to be contacted in case of illness or accident.

For:	For Entrant	For Driver	For Passenger
Name			
Telephone number			
Address			