

TOWNCROSS ENGINEERING SOUTH DOWNS STAGES

Saturday 6th February 2010

ENTRY FORM

Entrant _____

Licence No _____

Driver _____

Co-Driver _____

Address _____

Address _____

_____ Post Code _____

_____ Post Code _____

Tel Nos (Day) _____

Tel Nos (Day) _____

(Eve) _____

(Eve) _____

E-mail address _____

E-mail address _____

Licence No _____

Licence No _____

Club _____

Club _____

Next of Kin (The person to be contacted in the event of an accident)

Name _____ Tel No _____

Name _____ Tel No _____

Car _____

CC _____

Colour _____

Registration No _____

Class _____

Forced Induction Yes/No

Entry Fee £165.00 £ _____

Club Membership £18 Single £ _____

£23 Joint £ _____

Voluntary Marshals Draw £3 £ _____

Total (Cheques payable to The South Downs Stages) £ _____

Entries Sec: Mark Collings, 55, Paulsgrove Rd, Portsmouth PO2 7HP

SEEDING INFORMATION (Stage events only)

<u>EVENT</u>	<u>YEAR</u>	<u>STATUS</u>	<u>O/A</u>	<u>CLASS</u>
1 _____				
2 _____				
3 _____				
4 _____				

INDEMNITY

I declare that I have been given an 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. 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.

FOR ENTRANTS

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.

FOR DRIVERS

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

Entrant's Signature _____ Age _____/over 18

Driver's Signature _____ Age _____/over 18

Co-driver's Signature _____ Age _____/over 18

Any indemnity and/or declaration as prescribed above which is signed by a person under the age of 18 years shall be countersigned by that person's parent or guardian, whose full name and address shall be given and must be at the event.

	Driver	Co-driver
Parent/Guardian	_____	_____
Signature	_____	_____
Address	_____	_____
	_____	_____
	_____	_____
Phone No	_____	_____

official use only

A/C Name _____ Cheque No _____

Sort Code _____