



LAUNCESTON AND NORTH CORNWALL MOTOR CLUB LTD

MOTOR TRADERS CAR TRIAL

SUNDAY 7th JULY 2019

ENTRY FORM

Drivers Name				
Address				
Post Code				
E-mail address				
Telephone No				
Club				
Passengers Name				
Address				
Post Code				
Vehicle Make and Model				
Engine Capacity (cc) Class Entered (see regs)				
ASWMC Championship contender? Yes/No.				
Double Drive? (Please state Yes or No)				
Emergency (Contacts:			
For Driver				
For Passenge	er			
	Entry Fee: Membership: (if required)	£20 (per competitor) (under 16 £ £10	10)	
	Total:			

Cheques should be made payable to Launceston & North Cornwall Motor Club Ltd.

PLEASE READ AND <u>SIGN</u> INDEMNITIES AND DECLARATION OVER THE PAGE.

INDEMNIFICATION & DECLARATIONS

Held under the General Regulations of Motor Sport UK Ltd (incorporating the provisions of the International Sporting Code of the FIA) hereafter referred to as the Motor Sport UK.

I declare that I have been given the opportunity to read the General Regulations of the Motor Sports Association 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 I am competent to do so. I acknowledge that I understand the nature and type of 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 organization and/or conduct of the event are insured against loss or injury caused through their negligence.

I declare that my car is fitted with a free and uninterrupted differential and no limited slip device is fitted.

Driver's Signature	Age if under 18
Passenger's signature	Age if under 18

Please complete below if driver or passenger is under 18 years.

As the Parent/Guardian of the driver/passenger, 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 Motor Sport UK.

As the Parent/Guardian, I confirm that I have acquainted myself with the Motor Sport UK General Regulations, agree to pay any appropriate charges and fees pursuant to these regulations and hereby agree to be bound by those Regulations and submit myself without reserve to the consequences resulting from those Regulations. Further, I agree to pay as liquidated damages any fines imposed upon me up to the maxima set out in Part 3 Appendix 1.

THIS ENTRY IS MADE WITH MY CONSENT,

Name of PARENT or GUARDIAN of DRIVER or PASSENGER*

.....

Address.....

......

Postcode.....

*Delete as appropriate.

Signature of Parent or Guardian.....

Complete all relevant sections and post with entry fee to:

Alison Oates, Little Hendra Green, Egloskerry, Launceston, PL15 8SP Telephone 01566 785255 Email <u>a.oates@btinternet.com</u>

I hereby consent to the club retaining data for internal administration purpose. Full privacy policy is set out on the website. Please tick box