LAUNCESTON & NORTH CORNWALL MOTOR CLUB LTD

TESTING TRIAL 11 JUNE 2023 - ENTRY FORM - CARS

Date		
Name		ub & No.
Address		S Clubman Lic No
		Class
Postcode .		A
email		В
'Phone – Home		C
Work		
Passenger's name(if appropriate) Address		Club& NoRS Clubman Lic No
		Postcode
Car Type		Capacityc.c
PLEASE COMPLETE ALL SECTION		
Held under the General Regulations of Mereafter referred to as Motor Sport UK.		ON & DECLARATIONS. Atting the provisions of the International Sporting Code of the FIA)
I declare that I have been given the oppor for this event and agree to be bound by the		Regulations of Motor Sport UK and the Supplementary Regulations
		ent and I am competent to do so. I acknowledge that I understand ith motor sport and agree to accept that risk.
Further, I understand that all persons ha insured against loss or injury caused thro		the promotion and/or organization and/or conduct of the event are
I declare that my car is fitted with a free	and uninterrupted different	ial and no limited slip device is fitted.
I hereby consent to the Club retaining my	y data for internal administ	ration purposes (full privacy policy is set out on website). Please tick box
My age is		(if applicable, state 'over 18 years')
Entry Fee Membership Fee (if appropriate £10)	£22.00(Juniors £10.00]	
Total	£ (Cheques sh	ould be made payable to Launceston & North Cornwall Motor Club Ltd)
Bacs Details ACCOUNT NAME:LAUNCESTO REF Testing Trial & Name	N & NORTH CORNWALL MO	OTOR CLUB LTD: Account Number:58398300 SORT CODE 09-01-51
Driver's Signature		Age if under 18
Passenger's signature		Age if under 18

If the driver or passenger is under 18 years of age, the Parent/guardian must read and sign the declaration.

Note Where the Parent/Guardian/Guarantor is not present there must be a representative who must produce a written and signed authorisation to so act from the Parent/Guardian/Guarantor.

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

THIS ENTRY IS MADE WITH MY CONSENT,

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 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 these Regulations. Further, I agree to pay as liquidated damages any fines imposed upon me up to the maximum set out in Part 3 Appendix 1.

Name of PARENT or GUARDIAN of DRIVER or PASSENGER *		
Address	Postcode	
* Delete as appropriate.		
Signature of Parent or C	Guardian	
******	**************************************	
Emergency Contact:	Driver, please contact	
	On	
	Passenger, please contact	
	On	

Please return to Lisa Gregory,3 Trevayo Park,Boyton.Launceston.PL159TP (01566 770983) lolly.lisa@btinternet.com