

LAUNCESTON CLASSIC TRIAL - 15TH MARCH 2020

CAR ENTRY FORM

Drivers Full Name.....

Address.....

.....

Post Code..... RS Licence No.....

E- Mail address.....
(For final instructions and results)

Phone - Day..... Evening.....

Passengers Full Name.....

Address.....

.....

Post Code..... RS Licence No.....

Vehicle Make & Model.....

Engine Capacity (cc)..... Class Entered.....

Reg. No..... Year..... Novice – Yes / No

Emergency contacts:

For Driver (Name & Number).....

For Passenger (Name & Number).....

Entry Fee: **£30.00**

Total: £ _____

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

Alternative payment via bank transfer is available. Please tick box if paying by this method

Account name - **Launceston & North Cornwall Motor Club Ltd.**

Account No - **58398300**

Sort code - **09-01-51**

Reference - **Launceston and your initial and surname (eg Launceston W Smith)**

I HEREBY CONSENT TO THE CLUB RETAINING DATA FOR INTERNAL ADMINISTRATION PURPOSES. FULL PRIVACYPOLICY IS SET OUT ON THE WEBSITE. PLEASE TICK BOX

I CONSENT TO THE LAUNCESTON AND NORTH CORNWALL MOTOR CLUB CONTACTING BY EMAIL WITH INFORMATION ABOUT UPCOMING EVENTS. PLEASE TICK BOX

INDEMNIFICATION & DECLARATIONS Please sign (over the page).

I declare that:

1. I have been given an opportunity to read the General Regulations of the Motorsport UK 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 and competent to take part in the event. I understand that motorsport is dangerous and accident causing death, injury, disability and property damage

can and do happen. I understand that these risks may give rise to my suffering personal injury or other loss and I acknowledge and accept these risks.

2. To the best of my belief and the driver(s) possess(es) the standard of competence necessary for an event of this 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.
3. The use of the vehicle hereby entered is covered by insurance as required by the law which is valid for such part of this event as shall take place on roads as defined by the law.
4. 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 the 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.
5. Any application form for a Licence which was signed by a person under the age of 18 years was countersigned by that person's parent/legal guardian/guarantor, whose full names and addresses have been given.
6. 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 MOTORSPORT UK. As the Parent/Guardian/Guarantor I confirm that I have acquainted myself with the Motorsport UK 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.

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 as appropriate.

7. I hereby agree to abide by the Motorsport UK Child Protection Policy and Guidelines and the National Sporting Code of Conduct.
8. I undertake that at the time of the event to which this entry relates I shall have passed or am except from an ASN specified medical examination within the specified period. (H10.1.6)
9. I have read and fully understood the Procedure for Control of Drugs and Alcohol as contained in the MOTORSPORT UK Yearbook Regulations H39,D35.1, G15.1.4 and have also fully familiarised myself with the information on the web sites referred to (www.ukad.org.uk and www.wada.ama.org) in particular the UK Anti-Doping Rules which have been adopted by the MOTORSPORT UK (AS AMENDED). Further, if I am counter-signing as the Parent or Guardian of a minor then in addition to the deemed consent to the testing of the minor (Art 5.6.2) I hereby confirm that I give such consent for the minor concerned to be so tested.

Indemnity: In consideration of the acceptance of this entry I agree that neither any one of or any combination of the MOTORSPORT UK and its associated clubs, the organisers, the land owners or other occupiers, the promoters and their respective officers, servants, representatives and agents (the "Parties") shall have any liability for loss or damage which may be sustained or incurred by me as a result of participation in this event. Nothing in this clause is intended to or shall be deemed to exclude or limit liability for death or personal injury. To the fullest extent permitted by law I agree to indemnify and hold harmless each of the Parties in respect of any loss or damage whatsoever and howsoever arising from my participation in this event.

1. **If under the age of 18**, my parent/guardian has read the above and signed the declaration and agreement below.

My age is (if under 18)

Driver's Signature Age if under 18

Passenger's signature Age if under 18
(if appropriate)

If the driver or passenger is under 18 years of age, the Parent/guardian must read and sign the declaration.. **If both are under 18 and from different families a declaration from each family is required.**

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

THIS ENTRY IS MADE WITH MY CONSENT,

Name of PARENT or GUARDIAN of DRIVER or PASSENGER (Delete as appropriate.)

.....

Address.....

Postcode

Signature of Parent or Guardian

Please send all completed entry forms to

W F Kelly, The Stables, Kelly House, Kelly, Lifton, Devon, PL16 0HH