LAUNCESTON & NORTH CORNWALL MOTOR CLUB LTD

TESTING TRIAL 22 AUGUST 2021 - ENTRY FORM - CARS

Date		
NameClub & No		
Address		RS Clubman Lic No
		Class
Postcode		A
email		В
'Phone – Home		C
Work		
(if appropriate)		Club& NoRS Clubman Lic No
		Postcode
Car Type		Capacityc.c
PLEASE COMPLETE ALL SECTIO	NS	
	INDEMNIFICATI	ION & DECLARATIONS. brating the provisions of the International Sporting Code of the FIA)
I declare that I have been given the e Regulations for this event and agree to b		General Regulations of Motor Sport UK and the Supplementary
		event and I am competent to do so. I acknowledge that I understand with motor sport and agree to accept that risk.
Further, I understand that all persons hat insured against loss or injury caused through		h the promotion and/or organization and/or conduct of the event are
I declare that my car is fitted with a free	and uninterrupted differe	ntial and no limited slip device is fitted.
I hereby consent to the Club retaining m	y data for internal admini	stration 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)	£20.00(Juniors £10.00 £]
Total	£ (Cheques	should be made payable to Launceston & North Cornwall Motor Club Ltd)
Driver's Signature		Age if under 18
Passenger's signature(if appropriate)		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 C	GUARDIAN of DRIVER or PASSENGER *
Address	
	Postcode
* Delete as appropriate.	
Signature of Parent or C	Guardian
*******	***************************************
Emergency Contact:	Driver, please contact
2 ,	On
	Passenger, please contact
	On

Please return to P M Wevill, The Manor House, Lifton, Devon, PL16 0BJ (01566 784451) Email: j.wevill@btinternet.com