

# INDEMNIFICATION/DECLARATION

PLEASE READ, COMPLETE AND SIGN THE FOLLOWING:-

I declare that:

1. I have been given the 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 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.
2. To the best of my belief the driver(s) possess(es) 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 reached.
3. 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 declaration, issued a licence which permits me to do so.
4. 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 MSA. As the Parent/Guardian/Guarantor I confirm that I have acquainted myself with the MSA 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 Section Z.

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.

My age is ..... (if applicable state "Over 17 years")

ENTRANTS SIGNATURE ..... AGE (IF UNDER 18) .....

DRIVERS SIGNATURE ..... AGE (IF UNDER 18) .....

DATE .....

IF AN ENTRANT OR DRIVER IS UNDER 18 YEARS OF AGE, THIS DECLARATION MUST BE COUNTERSIGNED BY THE APPROPRIATE PARENT OR GUARDIAN

*This entry is made with my consent:*

FULL NAME .....

ADDRESS .....

TEL. NUMBER ..... RELATIONSHIP .....

SIGNATURE ..... DATE .....

## TORBAY MOTOR CLUB

Held under the General Regulations of the Motor Sports Association (incorporating the provisions of the International Sporting Code of the FIA) and the Supplementary Regulations.



### GERRY PICKARD MEMORIAL MAMHEAD HILLCLIMB 2011

20th August 2011

21st August 2011

## ENTRY FORM (Entry Fee Not Increased)

*Forward this form, with remittance to:*

**Mr Frank Butler**

**22 Preston Down Ave, Preston, Paignton, TQ3 1HD**

**Data Protection.** Torbay Motor Club is registered with the Data Protection Act 1998. Any personal information submitted on this form will be controlled in accordance with the Act.

Towing/Support Vehicle    4 Wheel Drive Yes / No    Reg No \_\_\_\_\_

Motor Home      Caravan      Van/Truck      Length Metres \_\_\_\_\_

Event Entered: 20th August  21st August

### Details of DRIVER

<b>NAME</b>		AGE <small>(if under 18)</small>
ADDRESS		
POST CODE	TEL.NO.	
COMP LICENCE TYPE:	COMP. LICENCE NO:	
<b>IMPORTANT:</b> FINAL INSTRUCTIONS and RESULTS WILL BE SENT by EMAIL so please write email address <u>clearly</u> in the box below.		

EMAIL ADDRESS:

### Details of CONTACT RELATIVE or FRIEND (in event of serious accident)

NAME	RELATIONSHIP
ADDRESS	
MOBILE TEL.NO.	TEL.NO.

### Details of ENTRANT or PRINCIPAL SPONSOR (an Entrant must be MSA licenced)

NAME	AGE <small>(if under 18)</small>
ADDRESS	
POST CODE	MSA LICENCE NO :

### ELIGIBILITY

I am a member of ...(insert club) ...

I hold a valid RTA Licence	(delete)	YES / NO
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### DOUBLE DRIVEN CARS ONLY:

If THIS entry relates to the "A" driver, tick box	<input type="checkbox"/>
Give NAME of OTHER driver (a separate entry form must be submitted for each driver)	

Separate form required for All Drivers in All Events

### CLASSES & CHAMPIONSHIPS

All drivers must complete Section (1).  
Those drivers who are contenders in the championships listed in Section (2) must also complete the relevant parts of Sections (2) and (3).

(1)	<b>ACCORDING TO SR.6 MY CAR IS IN CLASS ...</b>			
(2)	ASWMC	Torbay	ACSMC	WAMC
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3)	<b>CLASS IN CHAMPIONSHIP IN (2) ABOVE</b>			

### VEHICLE DETAILS

MAKE & MODEL			
REG. NO.		ENGINE CC	
Is the vehicle Road-going (Taxed, MOT'd & Insured) ?			YES / NO
Is the vehicle fitted with a Turbo/Supercharger ?			YES / NO
Type of fuel used? Petrol/Diesel/Methanol/Other (please specify)			

### FEES

(For Membership contacts of the Torbay MC see inside cover)			ENCLOSED
ENTRY FEE	£75.00 (1 Day)	£140.00 (2 Days)	£
BBQ Ticket's	£5 each	Number ____	£
PLEASE MAKE CHEQUES PAYABLE TO <b>TORBAY MOTORCLUB</b>			£

Please complete this form in full and enclose with the following:

- ⇒ THE SIGNED DECLARATION OVERLEAF,
  - ⇒ THE APPROPRIATE REMITTANCE.
  - ! Please do not use staples and do not send self-addressed envelopes
- Official use only**

Cheque Amount	Cheque Date	Date Received	"A" Driver
Cheque No.	Bank A/C Name	Accept/Reject	Comp. No
Results System Championship Codes:			