

750 MOTOR CLUB LTD ENTRY FORM
THE WALSINGHAM SPORTING TRIAL
SUNDAY 7TH MARCH 2010

JACKSON'S WOOD, HAYMANS HILL, HORSMONDEN, KENT TN12 8BX

ENTRY FEE £35:00

Cheques payable to 750 MC Ltd Trials Centre

DRIVER

PASSENGER

FIRST NAME

FIRST NAME

SURNAME

SURNAME

ADDRESS

ADDRESS

TOWN

TOWN

—
POSTCODE

POSTCODE

TELEPHONE NO.

TELEPHONE NO.

EMAIL

PASSENGERS CLUB & NUMBER

750 M.C MEMBER

SportingTrials.com MEMBER

BTRDA MEMBER

ASWMC

BTRDA GRADE:

ENTRY TYPE: EG National B OR Clubsport

750 CLUB MEMBERSHIP NO.

SPORTING TRIAL.COM_ NO.

ASWMC_NO.

R.A.C. MSA LICENCE NO.

BTRDA NO

I declare that :

1 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 event and the potential risk inherent with motor sport and agree to accept that risk.

2 To the best of my belief the driver possesses the standard of competence necessary for an event 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 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.

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 at 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 Part 3, Appendix 3. **Note.** Where a 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 MSA Child Protection Policy and Guidelines.

SIGNATURE OF DRIVER _____

SIGNATURE PASSENGER _____

PARENT OR GUARDIAN OF DRIVER _____ (IF UNDER 18) AGE (IF UNDER 18) _____

PARENT OR GUARDIAN OF PASSENGER _____ (IF UNDER 18)

PERSON TO BE INFORMED IN THE EVENT OF AN ACCIDENT:-

DRIVER

PASSENGER

NAME

NAME

ADDRESS

ADDRESS

TELEPHONE NO.

TELEPHONE NO.

FINAL CLOSING DATE FOR ENTRIES 4TH MARCH 2010