

KYNASTON AUTO SERVICES RALLY 2013

ENTRY FORM

SATURDAY 16TH FEBRUARY

PLEASE PRINT CLEARLY AND USE BLOCK CAPITALS

ENTRANT (If application								
NAME:			LICENCE NUMBER:					
COMPETITOR DETA	AILS:							
DRIVERS NAME:			CO-DRIVER NAME:					
ADDRESS:		ADDRESS:						
POSTCODE:			POSTCODE:					
TEL NO:			TEL NO:					
E-MAIL:			E-MAIL:					
MSA LICENCE NO:			MSA LICENCE NO:					
CLUB:	ASWMC: Y	ES NO	CLUB:		1	ASWMC:	YES	NO
EMERGENCY CONT	ACT:							
NAME:			NAME:					
RELATIONSHIP:			RELATIONSHIP:					
TEL NO:			TEL NO:					
RALLY CAR DETAILS								
MAKE:			CC:					
MODEL:			REGISTRATION NUMBER:					
COLOUR: CLASS:		FORCED INDUCTION: YES NO						
SCRUTINEERING: Friday Saturday (PLEASE DELETE AS APPROPRIATE)								
FINAL INSTRUCTIONS: POST or EMAIL to DRIVER or CODRIVER								
			ORMATIC					
The order of seeding will be at the organisers discretion. To assist us in seeding your entry, please list								
the last five events the DRIVER ONLY has competed on.								
						ī		
EVENT	SURFACE	DA	ATE	CLASS & RE	SULT	OVERAI	L RES	ULT
WHERE WOULD YOU SEED YOURSELF BETWEEN 1 & 60?								

PAYMENT DETAILS					
ENTRY FEE:	£	185:00			
MEMBERSHIP TO SOUTH HAMS MOTOR CLUB:	£	15:00 per crew member			
South west Clubman Rally Challenge (must be a member of SHMC)		5:00 per crew member			
TOTAL:	£.				
Please make cheques payable to 'SOUTH HAMS MOTOR CLUB'					
Completed entry forms should be sent to:					
Andrew Bulpin, 103 Queen Street, Newton Abbot, TQ12 2BG					

DECLARATION OF INDEMNITY:

I declare that I have been given the opportunity to read the General Regulations of the Motor Sport 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 with motor sport and agree to accept the 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.

I also declare that the information given on this entry form is a true and accurate record and I enclose the appropriate entry fee in accordance with the Supplementary Regulations.

SIGNED:	DATE:ENTRANT/DRIVER			
SIGNED:	DATE:ENTRANT/CO-DRIVER			
	(DELETE AS APPROPRIATE)			
IF THE ENTRANT, DRIVER OR CO-DRIVER IS UNDER 18 YEARS OF AGE, THEN THIS FORM MUST BE COUNTERSIGNED BY EITHER A PARENT OR A GUARDIAN.				
SIGNED:	DATE:PARENT/GUARDIAN			

(DELETE AS APPROPRIATE)