



Telbrook Engineering Mallory Sprint Sunday 6th September 2009 Entry Form

Block Capitals Please

Drivers Name

Address

Telephone No: Home

Work

Mob

E Mail Address

Championship

SBD British Sprint Championship Contender

Yes/No

Others

Competition Licence No

Grade & Category

I am a member of

Motor Club

Car details:-

Make

Model

Capacity

Super/Turbo Charged – **YES/NO**

Will the car be running on Petrol – **YES/NO** If NO Which Fuel will be used?

Class

Car will also be driven by

A separate entry form Required

Do you own a RT Licence? – **YES/NO**

ENTRY FEE £140 Cheques should be made payable to '**Sheffield & Hallamshire Motor Club**' and crossed.

The completed Entry form and fee should be sent to:-

**Mr P Howgate
24 Smelterwood Crescent
Sheffield
S13 8RE**

Indemnification

1. I declare that 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 physically and mentally fit to take part in the event and am competent to do so. I acknowledge that I understand the nature and type of the competition and the potential risk inherent with motor sport and agree to accept that risk. Further I understand that all persons having any connections with the promotion and/or organisation and/or conduct of the event are insured against loss or injury caused through their negligence.

2. I declare that 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 which will be reached.

3. 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 my vehicle, I may not take part unless I have declared such disability to the ASN, who have, following such declaration, issued a licence which permits me to do so.

State your age if you are under 18

DRIVER

Signature

Date

THIS FORM MUST BE COUNTERSIGNED BY THE PARENT/GUARDIAN/GUARANTOR IF THE DRIVER IS UNDER 18 YEARS OF AGE.

- 4 I am the **PARENT/GUARDIAN/GUARANTOR** (delete as appropriate) of the driver and the 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.

Full Name

Relationship to Driver

Address

Date

Signature

Telephone No

NAME & ADDRESS OF THE PERSON TO BE CONTACTED IN CASE OF SERIOUS ACCIDENT

Name

Address

Tel. No