

2008 KYRLE TRIAL ENTRY FORM

DRIVER'S FULL NAME _____

(Block capitals)

Name for programme _____

ADDRESS _____

Postcode _____ Tel No _____

PASSENGER'S FULL NAME _____

Name for programme _____

VEHICLE MAKE _____ MODEL _____ COLOUR _____

ENGINE CAPACITY _____ REGISTRATION No _____ CLASS _____

Is the vehicle fitted with a limited slip differential or any other traction control device? YES / NO

DETAILS OF FRONT TYRES			DETAILS OF REAR TYRES		
MAKE	TYPE	SIZE	MAKE	TYPE	SIZE

Driver is a member of _____ Club

Passenger is a member of _____ Club

Insurance Company Name (If not using Lockton scheme) _____

E-Mail Address for Results _____

ACTC Championship No _____ MSA Licence No _____ (Not Required for **Class 0**)

Please indicate if you will be bringing a trailer YES / NO Car fuelled by Petrol or _____

FEE ENCLOSED - Entry £ 29.50

- Insurance £ _____

- Meal Deposit £ _____ Full price £5.00. Pay £4.00 as deposit

- **TOTAL** £ _____

Please make cheques payable to **Ross & District Motor Sport Ltd** & send to
Neil Forrest, East Wing, Abenhall Lodge, Mitcheldean, Glos. GL17 0DT

PLEASE SIGN OVERLEAF

DECLARATION

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 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.

I declare that the use of the vehicle hereby entered will be covered by insurance as required by the law which is valid for such part of this event as shall take part on roads as defined by the law.

Under the provision of the Data Protection Act 1985, the R&DMC requires your permission to hold the information on this entry form on a computer for the purpose of producing address lists, results and other such data for running the trial. Your signature below gives the organisers the right to enter this information into a computer.

Age (If 18 or under) _____

Signed (Driver) _____ Date _____

Signed (Passenger) _____ Date _____

PARENT OR GUARDIAN (if entrant is under 18)

If I am the Parent / Guardian 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'.

Signed _____ Date _____

Name _____

Address _____

Relationship _____