

# ROSS and DISTRICT MOTOR SPORTS Ltd

## Spring RosSolo

29th April 2018

<u>DRIVER</u> ..... (First & last name)
Address..... ..... .....
Post Code.....
Telephone.....
E-address.....
Club.....
<u>DRIVER NEXT OF KIN</u>
Name.....
Relationship..... Tel.....

Which Event are you entering? Please circle all which apply	
<u>NATIONAL B</u> (£30) or <u>CLUBMAN</u> (£28)	
BTRDA Championship	No
Cotswold Championship	Championships
WAMC Championship	
WAMC Junior Challenge	
Competition Licence Number.....	No comp licence required
How are you paying? BACS or Cheque	

<u>PASSENGER (if appl)</u> ..... (First & last name)
Address..... .....
Telephone.....
E-address.....
Club (Nat B only) .....

<u>VEHICLE</u>
Make & Model.....
Registration..... Colour.....
Actual Engine Capacity..... Year.....
Diesel? Yes / No Forced Induction? Yes / No
Class Entered.....

<u>PASSENGER NEXT OF KIN</u>
Name.....
Relationship..... Tel.....

**DECLARATION:** I declare that 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 the 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.

My age is .....(if applicable, state 'over 17 years')

DRIVER'S SIGNATURE.....

Please Note:- If Entrant or Driver is under 18 years of age, the following MUST be completed by that person's Parent or Guardian. They must please read D13.1.1c, and either endorse the signing on form on the day, or a letter stating event, date, permission etc (basically showing that the Parent/Guardian/Guarantor knows what is happening) must be produced at signing on. This letter will be retained by the organisers.

I declare that I am the Parent/Guardian/Guarantor of the Entrant/Driver.....

Date..... Address.....

..... Telephone.....

Cheques payable to Ross & District Motor Sports Ltd .....or pay by BACS on line.

**Send to:- Marilyn Wall, Old Crown Inn, Crown Lane, Yorkley, Gloucestershire, GL15 4TP 01594 560229**