

Tour of Wessex

22nd August 2010

Entry Form

Crew

Driver		Navigator	
Name		Name	
Address		Address	
Post Code		Post Code	
Phone Number		Phone Number	
MSA Licence No.		MSA Licence No.	
Championships	HRCR / ASWMC	Championships	HRCR / ASWMC
Next of Kin		Next of Kin	
Phone Number		Phone Number	
Correspondence	Driver / Navigator	Class	
Delivery	Post / Email	Email Address	

Car

Make		Model	
Colour		CC	
Registration		Year	

Insurance

Lockton	Own Extended Cover
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Payment

Entry Fee	£90	£
Lockton Insurance	£27.50	£
Total		£

Please make cheques payable to "Road Rally Register"

Please return completed form and fee to:
Graham Dance, 534 Woodway Lane, Coventry, CV2 2AF

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Indemnity

The event will be held under the general regulations of the Motor Sports Association (incorporating the provisions of the International Sporting Code of the FIA) and the supplementary regulations that accompany this entry form. 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 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 connection with the promotion and/or organisation and/or conduct of the event are insured against loss or injury caused through their negligence.

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 MSA which has, following such declaration, issued a licence which permits me to do so.

Drivers Signature		Navigators Signature	
Age		Age	

Countersignatures

If either member of the crew is under the age of 18, this entry form must be countersigned by their parent or guardian

Name		Name	
Address		Address	
Signature		Signature	

Seeding

Event	Year	D / N / Crew	Overall Position	Class & Position
Out of 75 entries, where would you expected to be seeded?				

Official

Received	
Payment	
Cheque Name & Number	

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