

**Plymouth Motor Club**  
**Vospers Werrington Park Hillclimb**  
**Entry Form for Saturday 29th 2017**

<b>Details of DRIVER</b>			
NAME		AGE (if under 18 or over 60)	
ADDRESS			
POST CODE		TEL.NO:	
MSA LICENCE TYPE		MSA LICENCE NO	
E-MAIL ADDRESS			
<b>Details of CONTACT RELATIVE or FRIEND</b> (in event of serious accident)			
NAME		RELATIONSHIP	
ADDRESS			
MOBILE TEL.NO.		TEL.NO.	
<b>Details of ENTRANT or PRINCIPAL SPONSOR</b> (an Entrant must be MSA licenced)			
NAME		AGE (if under 18 or over 60)	
ADDRESS			
POST CODE		MSA LICENCE NO:	
<b>ELIGIBILITY</b>			
I am a member of (insert club)...		I hold a valid driving licence	YES/NO
<b>DOUBLE DRIVEN CARS <u>ONLY</u>:</b>			
If THIS entry relates to the driver to run SECOND, tick this box.			<input type="checkbox"/>
Name of other driver (each driver must submit an entry form)			
<b>CLASSES &amp; CHAMPIONSHIPS</b>			
All drivers must complete Section <b>A</b> . Those drivers who are contenders in the championships listed in Section <b>B</b> <u>must also</u> complete the relevant parts of Section <b>B</b> .			
<b>Section A ACCORDING TO SR.9 MY CAR IS IN CLASS ...</b>			
<b>Section B CHAMPIONSHIPS</b> (tick box)	ASWMC Hillclimb Championship	Cornish Speed Championship	ACSMC Hillclimb Championship
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SBD/HSA Speed Championship	Torbay Speed Championship	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>VEHICLE DETAILS</b>			
MAKE & MODEL			
REG. NO.		ENGINE CC	
Is your car fitted with a motorcycle engine (Letchworth Trophy)			YES/NO
Is the vehicle Road-going (taxed & insured) ?			YES/NO
Is the vehicle fitted with a Super/Turbocharger ?			YES/NO
<b>FEES</b>			
PLYMOUTH MOTOR CLUB MEMBERSHIP (£12.00 If required)			£
ENTRY FEE	£81		£
Saturday night BBQ	£5.00 (per ticket)		£
PLEASE MAKE CHEQUES PAYABLE TO <b>PLYMOUTH MOTOR CLUB</b>			<b>Total £</b>

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.

## INDEMNIFICATION/DECLARATION

### PLEASE READ, COMPLETE AND SIGN THE FOLLOWING:-

#### I declare that:

- 1) I have been given an opportunity to read the General Regulations of the Motor Sports Association and, if any, the Supplementary I have been given an 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 am physically and mentally fit and competent to take part in the event. I understand that motorsport is dangerous and accidents causing death, injury, disability and property damage can and do happen. I understand that these risks may give rise to my suffering personal injury or other loss and I acknowledge and accept these risks.
- 2) 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) The use of the vehicle hereby entered is covered by insurance as required by the law which is valid for such part of this event as shall take place on roads as defined by the law.
- 4) 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 the vehicle, I may not take part unless I have declared such disability to the ASN which has, following such declaration, issued a licence which permits me to do so.
- 5) Any application form for a Licence which was signed by a person under the age of 18 years was countersigned by that person's parent/legal guardian/guarantor, whose full names and addresses have been given.
- 6) If I am the Parent/Guardian/Guarantor 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. As the Parent/Guardian/Guarantor I confirm that I have acquainted myself with the MSA General Regulations, agree to pay any appropriate charges and fees pursuant to those Regulations (to include any appendices thereto) and hereby agree to be bound by those Regulations and submit myself without reserve to the consequences resulting from those Regulations (and any subsequent alteration thereof). Further, I agree to pay as liquidated damages any fines imposed upon me up to the maxima set out in Part 3, Appendix 1.  
**Note:** Where the Parent/Guardian/Guarantor is not present there must be a representative who must produce a written and signed authorisation to so act from the Parent/Guardian/Guarantor as appropriate.
- 7) I hereby agree to abide by the MSA Child Safeguarding Policy and Guidelines and the National Sporting Code of Conduct.
- 8) I undertake that at the time of the event to which this entry relates I shall have passed or am exempt from an ASN specified medical examination within the specified period. (H10.1.6)
- 9) I have read and fully understood the Procedure for Control of Drugs and Alcohol as contained in the MSA Yearbook Regulations H39, D35.1, G15.1.4 and have also fully familiarised myself with the information on the web sites referred to ([www.ukad.org.uk](http://www.ukad.org.uk) and [www.wada-ama.org](http://www.wada-ama.org)) in particular the UK Anti-Doping Rules which have been adopted by the MSA. Further, if I am counter-signing as the Parent or Guardian of a minor then in addition to the deemed consent to the testing of that minor (Art 5.6.2) I hereby confirm that I give such consent for the minor concerned to be so tested.

**Indemnity:** In consideration of the acceptance of this entry I agree that neither any one of or any combination of the MSA and its associated clubs, the organisers, the land owners or other occupiers, the promoters and their respective officers, servants, representatives and agents (the "Parties") shall have any liability for loss or damage which may be sustained or incurred by me as a result of participation in this event. Nothing in this clause is intended to or shall be deemed to exclude or limit liability for death or personal injury. To the fullest extent permitted by law I agree to indemnify and hold harmless each of the Parties in respect of any loss or damage whatsoever and howsoever arising from my participation in this event.

ENTRANT SIGNATURE \_\_\_\_\_ AGE (IF UNDER 18) \_\_\_\_\_

DRIVER SIGNATURE \_\_\_\_\_ AGE (IF UNDER 18) \_\_\_\_\_

DATE \_\_\_\_\_

IF AN ENTRANT OR DRIVER IS UNDER 18 YEARS OF AGE, THIS DECLARATION MUST BE COUNTERSIGNED BY THE APPROPRIATE PARENT OR GUARDIAN

*This entry is made with my consent:*

FULL NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TEL. NUMBER \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Last updated: 11/12/15

**Please complete this form in full, SIGN THE DECLARATION ABOVE and send to:-  
Mrs. C. Pearce, 8 Witham Gardens, Efford, Plymouth PL3 6ES with the appropriate remittance.**

**• Please do not use staples and do not send self-addressed envelopes**

Cheque amount	Cheque date	Date received	"A" driver
Cheque No.	Bank A/C name	Accept/reject	Comp No.