



Allglass Anglia MiddleWick Stages 2017

Entry Form - Indemnification

Allglass Anglia MiddleWick Stages 2017

Entry Form

Seeding Information

Please enter the DRIVER'S most recent results on sealed surface special stage rallies:

| Event Name | Date | Status | O/A | Class |
|------------|------|--------|-----|-------|
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Out of 60 entries, where would you expect to be seeded ?

Any other relevant information:

- 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 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 risk.
- In consideration of the acceptance of this entry, I agree that neither any one of or combination of the MSA and its associated clubs, the organisers, the track 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 the 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 each of the Parties in respect of any loss or damage whatsoever and howsoever arising from my participation in the Event.
- 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.
- 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 which has, following such declaration, issued a licence which permits me to do so.
- If I am the Parent or 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'. As the Parent or Guardian '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.'
- I have read and fully understand the Procedure for Control of Drugs and Alcohol as contained in the Competitors' and Officials' Yearbook Regulations H39, D35.1, G15.1.4 and have also fully familiarised myself with the information on the websites referred to (www.ukad.org.uk and www.wada-ama.org) in particular the UK Anti Doping Rules which have been adopted by the MSA (as amended). 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 the minor (UKAD Code Art 5.6.2) I hereby confirm that I give such consent to the minor concerned to be so tested.
- I hereby agree to abide by the MSA Child Protection Policy and Guidelines.

Please state your age if you are under 18.

Signed: Entrant: Age: Date:
 Driver: Age: Date:
 Co-Driver: Age: Date:

If the Entrant, Driver or Co-Driver is under the age of 18 years, then this form MUST be countersigned by either a Parent or Guardian, whose full names and address must be given.

Signed: Date:

Relationship to Entrant/Driver/Co-Driver:

Full Name:

Address:

Note: Where the Parent or Guardian is not present there must be a representative who must produce a written and signed authorisation to so act from the Parent/Legal Representative/Guardian/Guarantor as appropriate.



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Sunday 21st May 2017

Entry Form

Held under the General Regulations of The Motor Sport Association (incorporating the provisions of the International Sporting Code of the F.I.A.) and the Supplementary Regulations.

Crew Details: Sponsor/ENTRANT+*: Ent.Lic.No:

+ An ENTRANT will only be shown if a copy of the 2017 Entrants Licence is attached.

| | Driver | Co-Driver |
|-----------------|-----------------------|------------------------|
| Name: | | |
| Address: | | |
| Postcode: | | |
| Home Tel No: | | |
| Work Tel No: | | |
| Mobile Tel No: | | |
| E-mail: | | |
| MSA Licence No: | | |
| Club: | | |
| Next of Kin: | | |
| Relationship: | | |
| Tel No: | | |
| Championships: | AEMC /ASEMC: yes/no * | AEMC:/ ASEMC: yes/no * |

Vehicle Details:

| | | | | |
|--------------|----------------------|--------------------------|----------------------|-----------------|
| Make: | <input type="text"/> | Cubic Capacity: | <input type="text"/> | cc |
| Model: | <input type="text"/> | Class Entered: | <input type="text"/> | 0 1 2 3 4 5 6 * |
| Colour: | <input type="text"/> | Forced Induction/Rotary: | <input type="text"/> | Yes / No * |
| Reg. Number: | <input type="text"/> | Four Wheel Drive: | <input type="text"/> | Yes / No * |
| Year: | <input type="text"/> | | | |

Information:

* delete as appropriate

| | | |
|--------------------------|----------------------|------------------|
| Correspondence to: | Driver / Co-Driver * | |
| Preferred Scrutineering: | Saturday: Yes / No* | Sunday: Yes / No |

Entry Fees:

Please make cheques payable to GBMCWAC

| | | |
|--|------------------------|---------|
| Discounted entry fee (received up to 13 th May 2017): | (Class '0' £ 200) £225 | £ |
| Standard entry fee (received after 14 th May 2017): | £ 250 | £ |
| Charity donation | suggested min: £ 15 | £ |
| Donation for Marshal's Draw | suggested amount £ 5 | £ |
| 12 months WAC Membership (Driver/Co-Driver)* | £ 10 each | £ |
| 12 months GBMC Membership (Driver/Co-Driver)* | £ 15 each | £ _____ |
| Total Enclosed: | | £ _____ |

We confirm that the person paying the donation to charity pays sufficient tax for 'Gift Aid' to apply to the donation. Yes / No *

Please send the completed entry form with appropriate fees (cheques payable to GBMC/WAC) to:

Irene Lewsey 1 Hayes Chase Battlebridge Wickford S11 7QT

HAVE YOU COMPLETED THE SEEDING INFORMATION AND SIGNED THE INDEMNITY OVERLEAF?

Information collected in this form will be stored on a computer in accordance with the provisions of the Data Protection Act. However, competitors should be aware that their personal details may be displayed on web based media as part of the results