

GUERNSEY KART & MOTOR CLUB LBG

SPEED EVENT NEW CAR ENTRY FORM

EVENT _____ DATE _____

To be held at : _____

Under the GCRs of the MSA and the Standing Competition Rules and Supplementary Regulations of the Club

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 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 event 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.
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 road worthy for the event having regard to the course and the speeds which will be reached.
3. I understand that should I at any 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.
4. I hereby agree to abide by the MSA Child Protection Policy and Guidelines.
5. I undertake that at the time of the event to which this entry relates I shall be in possession of a current Guernsey driving licence (applicable to car competitors only)

IF DRIVER IS UNDER 18 YEARS NEEDS TO FILL OUT UNDER 18 ENTRY FORM

PLEASE WRITE IN BLOCK LETTERS

DRIVERS NAME _____

LICENCE TYPE & No. _____

ADDRESS _____

POST CODE _____ Tel Nos _____

MAKE _____ MODEL _____

Programme Details _____

CUBIC CAPACITY (without turbo add-on) _____ TURBO / SUPERCHARGED

CLASS NUMBER TO BE ENTERED AS LISTED IN SUPPLEMENTARY REGS

COMPETITION No _____ SIGNATURE _____ DATE _____

This car is also driven by (separate entry form required) _____

ENTRY FEE : CASH _____ CHEQUE _____ Membership No

NAME AND TELEPHONE No OF RELATIVE OR FRIEND TO BE INFORMED IN THE CASE OF A SERIOUS ACCIDENT.

NAME _____ TEL No. _____

THE COMMITTEE WILL NOT BE RESPONSIBLE FOR ANY ERROR IN THE CONNECTION WITH THIS ENTRY IF THE FORM IS NOT CORRECTLY OR COMPLETELY FILLED IN.