

## Chelmsford Motor Club - 22nd January 2012 - TRS (Essex) Ltd Brands Hatch Stage Rally

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, and any written instructions that the Organising Club may issue for the event.

**PLEASE COMPLETE IN BLOCK CAPITALS AND TICK WHERE REQUIRED TO DO SO**

ENTRANT OR MAIN SPONSOR	_____		
ENTRANTS LICENCE NUMBER	_____	LICENCE NUMBER MUST BE GIVEN TO THE ENTRIES SECRETARY BEFORE 15/01/2012	

DRIVERS FULL NAME _____	CO-DRIVER FULL NAME _____
ADDRESS _____ _____	ADDRESS _____ _____
POSTCODE _____	POSTCODE _____
MOBILE TEL _____	MOBILE TEL _____
EVENING TEL _____	EVENING TEL _____
2012 LICENCE NO/GRADE _____	2012 LICENCE NO/GRADE _____
CLUB _____	CLUB _____
DRIVER EMAIL _____	CO-DRIVER EMAIL _____

CAR _____	CC _____	FORCED INDUCTION Yes <input type="checkbox"/> No <input type="checkbox"/>	
COLOUR _____	REGISTRATION _____		
CLASS A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>	SCRUTINEERING	SATURDAY <input type="checkbox"/>	SUNDAY <input type="checkbox"/>

<b>CHAMPIONSHIPS</b>					
DRIVER ACSMC <input type="checkbox"/>	DRIVER AEMC <input type="checkbox"/>	DRIVER ASEMC <input type="checkbox"/>			
CO-DRIVER ACSMC <input type="checkbox"/>	CO-DRIVER AEMC <input type="checkbox"/>	CO-DRIVER ASEMC <input type="checkbox"/>			

EMAIL ADDRESS FOR ALL CORRESPONDENCE	DRIVER <input type="checkbox"/>	CO-DRIVER <input type="checkbox"/>
WHERE SHOULD TICKETS & PASSES BE POSTED TO	DRIVER <input type="checkbox"/>	CO-DRIVER <input type="checkbox"/>

PREFERRED SEEDING NUMBER _____
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ENTRY FEE £250.00 (£260 IF PAYING BY PAYPAL)	£ _____
CMC MEMBERSHIP £10 (EACH)	£ _____
TOTAL ENCLOSED (CHEQUES PAYABLE TO "MOTORSPORT CLUB OF CHELMSFORD LTD")	£ _____
IF PAYING BY BACS, PLEASE ENSURE THAT YOU USE INCLUDE YOUR REFERENCE NUMBER IN THE TRANSACTION	
Bank: Barclays	Account Name: Motorsport Club of Chelmsford Ltd
Sort Code: 20-19-95	Account Number: 00684937

<h3>START NUMBER</h3> <p>For Official use only</p>
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### SEEDING INFORMATION (STAGE EVENTS ONLY IN THE LAST 3 YEARS)

	EVENT	YEAR	STATUS	O/A	CLASS
1					
2					
3					
4					
5					

# INDEMNITY

**I declare that:**

1. - 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 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.
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 any 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. - "I am the Parent/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/Guardian I confirm that I have acquainted myself and the minor 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. (In addition please note that the above is subject to the requirements of U.14.1.5.)
7. - I hereby agree to abide by the MSA Child Protection Policy and Guidelines.

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.

ENTRANTS SIGNATURE		AGE:	/OVER 17
DRIVERS SIGNATURE		AGE:	/OVER 17
CO-DRIVERS SIGNATURE		AGE:	/OVER 17

	DRIVER	CO-DRIVER
PARENT/GUARDIAN FULL NAME		
SIGNATURE		
ADDRESS		
PHONE NO		

PERSONS TO BE NOTIFIED IN THE CASE OF A SERIOUS ACCIDENT

	DRIVER	CO-DRIVER
NAME		
PHONE NUMBER		
ADDRESS		

FOR OFFICIAL USE ONLY

REC	REF	ACCOUNT NAME CHEQUE NO			
			SORT CODE		