



MG CAR CLUB S.W. CENTRE

KIMBER CLASSIC TRIAL '17th April 2010- ENTRY FORM

**All questions MUST be fully and clearly answered.
Incorrectly completed entry forms will be returned for correction**

Driver's Full Name.....

Address

..... Post Code.....Tel. No:.....E-mail:.....

Club Name.....Membership No:.....

Please state if Novice.....

(A novice is a competitor who has not won an award in a trial run under MSA permit)

Passenger's Full Name.....

Address

.....Post Code..... Tel. No:.....

Make of CarModel.....Class.....

Registration No:Year Registered..... Engine Capacity

Tyres: Front Size/Make.....Rear Size/Make.....

Spare Tyres.....

Is a limited slip device fitted?

Do you require Lockton Insurance and are able to answer "Yes" to all questions under section 21 of the SRs?..... If not, and you still require Lockton Insurance ,do you require a Proposal Form?.....

If you do NOT require Lockton Insurance you MUST give details of your own Insurance Co. covering you for this event (see declaration overleaf).

Company.....Address.....

ENTRY FEES

KIMBER CLASSIC TRIAL @ £27.00

Lockton Insurance @ £14.18

Gymkhana £3.50

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KIMBER CLASSIC DINNER only (if not staying at the hotel) @£15 p.p.

(State if vegetarian or other special needs)

Total

If this applies state Team name and other 2 members (No charge)

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INDEMNIFICATION

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 declare that the use of the vehicle hereby entered will be 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.

I declare that the vehicle specification conforms in all respects to the class entered.

Further and additionally, I acknowledge that it will be my sole responsibility to ensure that my vehicle complies in every respect with the Road Traffic Acts 1972 and 1974 and the Motor Vehicle (construction and Use) Regulations 1987 or any statutory modifications or re-enactments for the time being in force.

Driver's Signature Date

Passenger's Signature..... Date

If the Driver/Passenger is under 18 years, the following must signed by Parent or Guardian.

Parent/Guardian Signature..... Date.....

Parent/Guardian Address
.....Post Code Phone Number

Please give names, addresses & 'phone nos. of persons to be contacted in the event of an accident.

DRIVER

PASSENGER

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Tel:.....

Tel:.....