



HARLECH & DISTRICT MOTOR CLUB



MERFYN HUGHES MEMORIAL RALI LLŶN SPONSORED BY EXPRESS MOTORS

22nd / 23rd March 2014

ENTRY FORM

Driver's Details

Name.....

Address.....

.....

.....Post Code.....

e – Mail address for correspondence.....

Tel No.....

Club.....

MSA Licence No.....

ANWCC: Y / N Glynne Edwards: Y / N

SD34: Y / N WAMC: Y / N

Co – Driver's Details

Name.....

Address.....

.....

.....Post Code.....

Tel No.....

Club.....

MSA Licence No.....

ANWCC: Y / N Glynne Edwards: Y / N

SD34: Y / N WAMC: Y / N

Vehicle Details

Make..... Model..... Colour.....

Reg No..... C.C..... Class (See ASR 6).....

Insurance Details

Do you qualify for the "Lockton Motor Sports Club Scheme"? Y / N

If No, please contact the Entries Secretary A.S.A.P

If using own insurance, Name of company..... Policy No.....

Seeding Details

Event Name	Date	Status	Rally Type	Driver Result	Co Driver Result	Class

Fees

I enclose cheque / postal order / cash for £..... made up as follows:

Entry Fee	£90.00
Lockton Insurance	£.....
H&DMC Membership	£.....
Total	£.....

Please make cheques payable to "Harlech & District Motor Club Ltd" and send with the completed entry form to Mr Caron Jones, Dolwyn, Lon Tyn Y Mur, Morfa Nefyn, Pwllheli, Gwynedd, LL53 6AY

DECLARATION

'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 risks. '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 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 harmless 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 hereby agree to abide by the MSA Child Protection Policy and Guidelines and the National Sporting Code of Conduct. 'I have read and fully understood 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 web sites 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 that minor (UKAD Code Art 5.6.2) I hereby confirm that I give such consent for the minor concerned to be so tested.

All Details on both sides of this form must be fully completed before the entry can be accepted!

Driver's Signature	Age (If under 18)	Comp Licence No.	Date
Navigator's Signature	Age (If under 18)	Comp Licence No.	Date

THIS ENTRY IS MADE WITH MY CONSENT

(For competitors under 18 years old.) Important: Please Refer To Regulation A7. of the 2014 "Blue Book"

Parent / Guardian Of

DRIVER	NAVIGATOR
Name:	Name:
Address:	Address:
Tel No:	Tel No:
Relationship:	Relationship:
Signature:	Signature:

NEXT OF KIN OF DRIVER	NEXT OF KIN OF NAVIGATOR
Name:	Name:
Address:	Address:
Emergency Tel No:	Emergency Tel No:

MARSHAL'S DETAILS

Name:
Address:
Contact Tel No:
Vehicle Details: