

2011 BRSCC Euro Saloon & Sportscar Championship

PLEASE WRITE IN BLOCK CAPITALS AND COMPLETE ALL SECTIONS

SECTION 1 – DRIVER DETAILS

Driver Name

Driver Address

Licence Grade Licence No ASN

Date of Birth Club Mem No Home Town

Phone: Home Work Mobile

Email Address

Please indicate below any prescribed drugs or conditions which should be notified to the Medical Team

SECTION 2 – VEHICLE DETAILS

Car Number

Make of Car

Type/Model cc

Transponder No Class Year

Sponsor Details

SECTION 3 – EVENT DETAILS

		Entry Fee	Entering	Yes	Notes
April 9	Silverstone - Nat	£345	<input type="checkbox"/>	<input type="checkbox"/>	
May 14	Donington	£240	<input type="checkbox"/>	<input type="checkbox"/>	
June 11	Brands Hatch	£240	<input type="checkbox"/>	<input type="checkbox"/>	
July 2	Pembrey	£345	<input type="checkbox"/>	<input type="checkbox"/>	
July 30	Oulton Park	£215	<input type="checkbox"/>	<input type="checkbox"/>	
August 20	Rockingham	£345	<input type="checkbox"/>	<input type="checkbox"/>	
September 17	Snetterton 300	£345	<input type="checkbox"/>	<input type="checkbox"/>	
October 22	Silverstone - Inter	£240	<input type="checkbox"/>	<input type="checkbox"/>	

Name and Address of Relative to be Notified in the Event of a Serious Accident

Name Relationship Telephone

Address

1. I declare 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 event and the potential risk inherent with motorsport 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. 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. 4. 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/guardian/guarantor, whose full names and address have been given. 5. If I am the parent/guardian/guarantor of the driver I understand that I 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/Guarantor I confirm that I have acquainted myself with the MSA 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 and fines imposed upon me up to the maxima set out in Part 3, Appendix 1. 6. I hereby agree to abide by the MSA Child Protection Policy and Guidelines.

Driver Signature Date

Age if Under 18 Any indemnity and/or declaration as described by the paragraphs above which is signed by a person under the age of 18 shall be countersigned by that person's parents or guardian, whose full name & address is below

Name of Parent/Guardian Signature of Parent/Guardian

Full Address

Please return completed Entry form to

BRSCC, Homesdale Business Centre, Platt Industrial Estate, Maidstone Road, Borough Green Kent TN15 8JL Fax (01732) 885783

