

Queen's University of Belfast Motor Club Entry Form.

EVENT: CIP QUB SUMMER LANES	DATE: 19 JULY 2014
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	DRIVER	NAVIGATOR
NAME		
ADDRESS		
ADDRESS		
TOWN		
POSTCODE		
E-MAIL		
MOBILE		

PLEASE ENSURE YOUR E-MAIL IS LEGIBLE AS THIS WILL BE USED FOR ALL COMMUNICATION, INCLUDING FINAL INSTRUCTIONS.

VEHICLE DETAILS

MAKE		MODEL	
CUBIC CAPACITY		YEAR OF MANUFACTURE	
REGISTRATION NUMBER		FRONT/REAR DRIVE	

AWARDS/CLASSES: 1ST 2ND & 3RD O/ALL ALSO 1ST 2ND & 3RD SPECIAL CLASS AWARDS FOR FWD. RWD. AND 1400CC ENDURO CARS

PRE 1980 CARS WILL AUTOMATICALLY BE ENTERED IN THE "QUEENS CLASSIC" WHICH WILL RUN CONCURRENTLY.

INSURANCE

I WILL ARRANGE MY OWN INSURANCE COVER PROOF OF COVER MUST BE PRODUCED AT SIGN ON		I REQUIRE COVER FROM LOCKTON MOTORSPORT RTS I AM ABLE TO SIGN THE LOCKTON DECLARATION	
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ENTRY FEE

PLEASE MAKE CHEQUES PAYABLE TO; QUEEN'S UNIVERSITY OF BELFAST MOTOR CLUB		
ENTRY FEE	£75.00	
LOCKTON INSURANCE	£20.00	
MEMBERSHIP DRIVER (IF REQUIRED)	£5.00	
MEMBERSHIP NAVIGATOR (IF REQUIRED)	£5.00	
TOTAL AMOUNT DUE		

IF YOU INTEND BRINGING YOUR CAR ON A TRAILER PLEASE TICK HERE	
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DECLARATION OF INDEMNITY

By the very fact of signing the entry form, the entrant, as well as the crew members submit themselves to the sporting jurisdictions specified in the International Sporting Code of the FIA and accept unreservedly these regulations, the General Regulations of the Motor Sports Association (MSA).

Entrants and drivers must sign the following undertaking:

'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. 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.

If I am the Parent/Guardian/Guarantor 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/Guarantor: 'I confirm I have acquainted myself with the MSA General Regulations, and 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.

Note: Where 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.

I declare that the information given on this entry form is a correct statement of facts as verified by me.

SIGNATURE OF DRIVER		AGE IF UNDER 18		DATE	
SIGNATURE OF NAVIGATOR		AGE IF UNDER 18		DATE	

NEXT OF KIN INFORMATION

	DRIVER	NAVIGATOR
NAME OF NEXT OF KIN AND RELATIONSHIP		
ADDRESS IF DIFFERENT FROM ABOVE		
CONTACT TELEPHONE NUMBER DURING EVENT		

ADDRESS TO WHICH COMPLETED ENTRY FORMS SHOULD BE SENT:

CONOR AULD
54 KILLYSORRELL ROAD
DROMORE
Co.DOWN
BT25 1LB

cauld04@qub.ac.uk MOBILE: 07808033142