



Sheffield & Hallamshire Motor Club

The Shann Trophy AutoSOLO & Production Car Autotest SUNDAY 30TH APRIL 2017

DRIVER
EMAIL ADDRESS
ADDRESS

POSTCODE TEL

Do you own a full RTA Licence? **Yes / No** If No, Supervisor's name

CLUB *(Must be invited (SR 4))*

PLEASE INDICATE HERE IF YOU WISH TO JOIN S&H MC ON THE DAY (CASH)

PASSENGER
EMAIL ADDRESS
ADDRESS

POSTCODE TEL

CAR MAKE

MODEL

REG NUMBER CAPACITY.....

CLASS ENTERED

FORCED INDUCTION **Yes / No** (please circle)

PETROL / DIESEL **Yes / No** (please circle)

CAR SHARED **Yes / No** (please circle) With:

ENTRY FEE **£20.00**

I am paying by: (please tick)

- CHEQUE**, made payable to "Sheffield & Hallamshire Motor Limited".
- BANK TRANSFER**, details as follows: *Bank: Yorkshire Bank, Sort Code: 05-08-18, Account No.: 33223113. Reference: AutoSOLO, followed by driver's full name.*

The Entries Secretary for the meeting to whom this completed entry form and fee should be sent is:

Mr Ian Houston, 30 Holmesdale Road, Dronfield, Derbyshire, S18 2FB. Tel 07555 106007

Please sign the indemnification on the back of this entry form - Thank you.

entry form



Sheffield & Hallamshire Motor Club

INDEMNIFICATION

'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 understand that should I at the time of this event be suffering from any disability whether permanent or temporary which is likely to affect prejudicially my normal control of my 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.'

'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.

'I hereby agree to abide by the MSA Child Protection Policy and Guidelines and the National Sporting Code of Conduct.'

State your age if you are under 18

Entrant's Signature

Driver's Signature

Any Indemnity and/or Declaration signed by a person under the age of 18, must be countersigned by his/her parent or guardian, to confirm that the entry is made with his/her consent, and whose full name and address must be stated below.

If I am the Parent or 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.'

Note: Where the Parent is not present there must be a Guardian who must produce a written and signed authorisation from the Parent/Guardian to act as their representative.

NAME

ADDRESS

POSTCODE

TEL

SIGNATURE

DATE

In the event of an accident please give details of the person you wish to be contacted:

NAME

ADDRESS

RELATIONSHIP

TEL