



SOUTH WEST CLUBMAN RALLY CHALLENGE
ENTRY FORM
 Organised by SHMC

PLEASE PRINT CLEARLY AND USE BLOCK CAPITALS

ENTRANT (If applicable)				
NAME:				
COMPETITOR DETAILS:				
DRIVERS NAME:		CO-DRIVER NAME:		
ADDRESS:		ADDRESS:		
POSTCODE:		POSTCODE:		
TEL NO:		TEL NO:		
E-MAIL:		E-MAIL:		
MSA LICENCE NO:		MSA LICENCE NO:		
ASWMC: YES NO		ASWMC: YES NO		
EMERGENCY CONTACT:				
NAME:		NAME:		
RELATIONSHIP:		RELATIONSHIP:		
TEL NO:		TEL NO:		
RALLY CAR DETAILS				
MAKE:		MODEL:		
MODEL:		REGISTRATION NUMBER:		
COLOUR:		FORCED INDUCTION: YES NO		
Class Details				
Please enter which class you are entering: DRIVERS (1-5)..... Navigator Class 6:.....				
CHAMPIONSHIP INFORMATION				
To ensure we create a championship for clubmen competitors we would be grateful if you can fill in the following information:				
EVENT	LOCATION	Will you be entering?	Do You like the venue?	Are you entering any other championships?
Kynaston Auto Services	Smeatharpe	YES / NO	Yes / No	
Bovington Stages	Bovington	Yes / No	Yes / No	
TSH Stages	Portreath	Yes / No	Yes / No	
Fat Albert Stages	Keevil	Yes / No	Yes / No	
Prima Motorsport	Smeatharpe	Yes / No	Yes / No	

PAYMENT DETAILS

Championship ENTRY FEE: £ 5:00 per person
MEMBERSHIP TO SOUTH HAMS MOTOR CLUB: £ 15:00 per person
TOTAL: £.....

Please make cheques payable to 'SOUTH HAMS MOTOR CLUB'

Completed entry forms should be sent to: Andrew Ballantyne,
8 Copland Meadows,
Totnes, Devon
TQ9 6ER

DECLARATION OF INDEMNITY:

I declare that I have been given the opportunity to read the General Regulations of the Motor Sport Association and, if any, the supplementary regulations for this 'challenge' 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 competition and the potential risk with motor sport and agree to accept the 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 also declare that the information given on this entry form is a true and accurate record and I enclose the appropriate entry fee in accordance with the Supplementary Regulations.

SIGNED:..... DATE:.....ENTRANT/DRIVER/CO-DRIVER
(DELETE AS APPROPRIATE)

SIGNED:..... DATE:.....ENTRANT/DRIVER/CO-DRIVER
(DELETE AS APPROPRIATE)

IF THE ENTRANT, DRIVER OR CO-DRIVER IS UNDER 18 YEARS OF AGE, THEN THIS FORM MUST BE COUNTERSIGNED BY EITHER A PARENT OR A GUARDIAN.

SIGNED:..... DATE:.....PARENT/GUARDIAN
(DELETE AS APPROPRIATE)