

NIGHTMARE RALLY 2012

Organised by South Hams Motor Club Ltd

ENTRY FORM

Official Use Only

DRIVER	NAVIGATOR
Name: _____	Name: _____
Address: _____ _____	Address: _____ _____
Post Code: _____	Post Code: _____
Telephone: _____	Telephone: _____
MSA Licence Number: _____	MSA Licence Number: _____
MOTOR CLUB: _____	MOTOR CLUB: _____
Next of Kin: _____	Next of Kin: _____
Telephone: _____	Telephone: _____

CORRESPONDENCES	
SEND ALL CORRESPONDENCE TO:	DRIVER / NAVIGATOR / BOTH (please circle)
E-mail address for acceptance and finals: _____	

CAR		
Make: _____	Model: _____	Reg No: _____
Colour: _____	Exact CC: _____	Class: _____
Forced Induction: Yes / No	4 wheel drive: Yes / No	

INSURANCE		
Locktons Insurance Broker Ltd scheme	Yes / No	(see supplementary regulations)
Own Insurance: Yes / No	Policy No:	Insurance Company Name:
Address:		

SEEDING			
Event	Date	Status	Overall / Class
.....	/
.....	/
.....	/
Out of 40 what number do you think you should be seeded:			

CHAMPIONSHIPS

	DRIVER Reg No	NAVIGATOR Reg No
ASWMC OPEN Navigational Rally Championship	-----	-----
ASWMC Novice Navigational Rally Championship	-----	-----
ASWMC Historic Rally Championship	-----	-----
ASWMC Endurance Rally Championship	-----	-----
SHMC	-----	-----

ENTRY FEES

Entry Fee

Nightmare Rally	@£ 69.00	-----
Lockton Insurance scheme	@£ 17:50	-----
South Hams Motor Club membership	@£ 15:00	-----

TOTAL ENCLOSED:-----

Please make cheques payable to: South Hams Motor Club Ltd
Please send completed forms to: Matt Power, 7 Moreleigh Green, Moreleigh, TQ9 7JD

INDEMNIFICATION

I declare that I have read the supplementary regulations issued for the event and agree to abide by these rules and be bound by them and by the General Regulations of the Motor Sports Association.

I declare that I am fit and able both physically and mentally 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 inherent with motor sport and agree to accept that risk. Further more 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 by their own negligence.

I declare that the use of the vehicle hereby entered will be covered by insurance as required by law, which is valid for such part of this event as shall take place on public roads as defined by law. 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 control of the vehicle, I may not take part unless I have declared my disability to the ASN which has, following such declaration issued a licence which permits me to do so.

Entrant's signature

Driver's signature _____ Age* _____ * Only applicable if under 18

Navigator's signature _____ Age* _____

Any indemnity and/or declaration as prescribed by the above which is signed by a person under the age of 18 years of age MUST be countersigned by that person's parent or guardian whose full name and address must be given:

This entry is made with my consent (Parent/Guardian to sign):

Name: _____

Address: _____

Postcode: _____

Tel No: _____

Signature: _____

FOR OFFICIAL USE ONLY

RECEIVED

ACCEPTED

WITHDRAWN

REFUND

CHEQUE 1