

Caernarvonshire & Anglesey Motor Club Limited

# Rob Roberts Memorial Car Trial

Sunday 24<sup>th</sup> September 2017

## Official Entry Form

Please print clearly in BLOCK CAPITALS and circle your choices:

**ENTRANT**..... MSA Licence No. ....

### **DRIVERS DETAILS**

Name.....

Address.....

.....

Postcode.....

Home Tel.....

Mobile Tel.....

Club.....

Hold full RTA drivers licence? YES / NO

Date of Birth (if under 18) .....

Driver's Email Address (BE CLEAR).....

Passenger's Email Address (BE CLEAR).....

MSA Competition Licence (National B drivers only)..... Novice? YES / NO

ANWCC Trials Championship contender? YES / NO

Driver contact in case of accident:

Name.....

Address.....

.....

Telephone.....

Passenger contact in case of accident:

Name.....

Address.....

.....

Telephone.....

**Event entered:** National B / Clubman **Class:** .....

**Car Make** ..... **Model**..... **Colour**..... **Engine capacity**.....

The entry fee is £35.00.

Make cheques payable to “**Caernarvonshire & Anglesey Motor Club Ltd**” or **I will pay cash on the day.**

/ continued

## DECLARATIONS:

"Held under the General Regulations of the Motor Sports Association (incorporating the provisions of the International Sporting Code of the FIA) and these Supplementary Regulations."

"I declare that I have been given the opportunity to read the General Regulations of the Motor Sports Association and 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 that 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 connection with the promotion and/or organization and/or conduct of the event are insured against loss of injury caused through their negligence."

**ENTRANT :** State your age if you are under 18..... **Sign**..... **Date**.....

**DRIVER :** State your age if you are under 18..... **Sign**..... **Date**.....

**NAVIGATOR:** State your age if you are under 18..... **Sign**..... **Date**.....

The following declaration must be completed by a parent/guardian/guarantor for each crew member under 18 years of age:

"If I am the Parent/Guardian/Guarantor of the driver/navigator, 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 that I have acquainted myself with the MSA General Regulations, agree to pay any appropriate charges and fees pursuant to those regulations (to include and 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 Section Z."

Parent/Guardian/Guarantor of Driver

Parent/Guardian/Guarantor of Navigator

Name.....

Name.....

Relationship to driver.....

Relationship to navigator.....

Address.....

Address.....

.....

.....

Postcode.....

Postcode.....

Telephone.....

Telephone.....

Sign here.....

Sign here.....

**NOTE:** Where the 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. (Complete the form on the next page).

In accordance with the Data Protection Act, applicants are hereby notified that the above details will be held on computer.

**Please send completed forms to:**

**Mr Tecwyn Jones**

**Min Awel, Rhosybol, Anglesey, LL68 9TS.**

**Tel 07879 493468.**

**Email: [jones6t@gllm.ac.uk](mailto:jones6t@gllm.ac.uk)**

## Parental Consent Authorisation

**This form must be completed by Parent / Guardian / Guarantor of any competitor or marshal who is under 18 years of age, where the said Parent / Guardian / Guarantor is not present.**

Dear Secretary of the Meeting,

**I, (name).....**

as legal Parent / Guardian / Guarantor of the undernamed competitor / marshal (delete as appropriate)

**(my name) .....**

**hereby authorise (name) .....**

to act as my representative at this event, to be signed on as the Parent / Guardian / Guarantor in accordance with MSA General Regulation B9.4.2.

This authorisation is applicable to the following event:

**Event:** The Rob Roberts Memorial Car Trial  
**Type of event:** Car Trial  
**Date:** Sunday 24<sup>th</sup> September 2017  
**Venue:** land at Rhuddlan Bach, Brynteg, Anglesey, LL78 7JJ.  
**Organising Club:** Caernarvonshire & Anglesey Motor Club Limited

**Legal Parent / Guardian / Guarantor to sign here: .....**

**Date of signing: .....**

**Representative of Parent / Guardian / Guarantor sign here: .....**

**Date of signing: .....**