



## NSSCC Race Entry Form Rounds 11 & 12 Croft Circuit 19<sup>th</sup> & 20<sup>th</sup> August 2017

'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.'

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Drivers Name							
Home Address							
		Post Code					
Telephone Number	Business		Mobile		Fax		
Drivers Competition Licence Number & Grade			Drivers Club and Membership Number				
Entrant		Entrant Licence Number and Grade					
Address							
					Post Code		
Telephone Number	Business		Mobile		Fax		
Make of Car				Type/Model			
Engine Make		сс		Transponder Number			
I wish to enter race for		Class		Permanent Race Number			
NSSCC							
Entry Fee Preferred payment Direct to Barclays, High Row Darlington Account No 20637041 sort code 20-25-29 Cheque or Direct payment £310. Debit/Credit Card £325.50				Has the driver raced before YES/NO*			
Licence to be signed for up			At this Circuit YES/NO*				
Refunds payable to:							





## Declaration

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.

I understand that motorsport can be 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 including but not limited to damage to property, economic loss, consequential loss or financial loss howsoever caused. 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 this 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'.

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.'

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. 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.'

My age is (state your age if under 18)							
Drivers		Entrants					
Signature		Signature					
I enclose a cheque, m	nade payable to D &DMC Ltd fo	or <b>£</b> which includes a donation of <b>£</b>	to the marshals fund.				
Please complete nam	ne and address of a relative or t	friend in the event of a serious accident	t				
Telephone							
Address							
	countersigned by that person	orescribed by the paragraphs above whe					
Signature							
Address							

Complete in full and return this form and entry fee to:

**D&DMC Ltd 77 Elizabeth Way Seaton Carew Hartlepool TS25 2AY** 





## **Payment Details**

		which also includes a do nk the sum of £ Date pa		
Or	ue, made payable c			
	Ca	ord Payment Auth	norisation	
I/We authorise Credit/Debit ca		charge the entry fee and any	associated charge	es to My/Our
Signature of Ca	ard Holder			
Name as printe	ed on Card			
Card Number				
Valid From	Valid To	Security Number (3 digits)	Issue number	Card type Credit/Debit
Address of Ca	rd holder if diffe	rent from driver		
Post code	Р	hone Number		··
E mail address	s for receipt;			