

Llys Y Fran HILL CLIMB OFFICIAL ENTRY FORM
Sunday 18th July 2010

Please send with the entry fee + 3 self addressed labels (or 2 self-addressed labels if you have given email address)
to
Rob Allender 50 Trallwn Road Swansea SA7 9XA. Tel 01792 791686 Mob 07999 523694
Email rob.allender@ntlworld.com

I understand that if this entry is accepted, my participation in the event is subject to the undertaking and indemnities as specified in the General Regulations of the RACMSA Ltd., and in the conditions of issue of my Competition Licence.

PLEASE USE BLOCK LETTERS THROUGHOUT PLEASE.

ENRANTS NAME **LIC NO**

(The Entrant & The Driver must P.T.O & sign declaration in the appropriate place)

DRIVER'S NAME..... **COMP. LIC NO & Grade** **NAT B/A**

AGE IF UNDER 18 If a driver or entrant is under 18 years of age this form must be countersigned by that person's Parent or Guardian (PTO & sign declaration)

Have you ever held a valid RTA License Yes/No Do you want your license signed Yes/No

ADDRESS.....**Postcode**

Tel..... **Mobile** **Email**

(Please write legibly as you will receive confirmation of entry by email)

Are you (a) A member of Swansea Motor Club?...YES Membership No.:..... NO/ I would like to join. Send me a form
Or (b) A Registered Entrant in a 2010 Championship?...YES/NO If Yes please indicate below
Or (c) A member an invited club? I am member of Club Membership No

YOU MUST BELONG TO ONE OF THE ABOVE CATEGORIES TO BE ELIGIBLE TO ENTER

I enclose herewith entry fee of **£85 STERLING** per day per driver .
Cheques made payable to Swansea Motor Club

CAR DETAILS I wish to enter the following car in **CLASS**

Make..... **Model/Type**..... **Year**.....

NO. OF CYLINDERS **C.C** **Supercharged (S) Turbocharged (T)** **Methanol Yes /No**
Video Camera fitted (Yes/NO)

This car is also driven by (separate entry form needed)
Who will be known as the no 7 driver (ie if your number is 25.. theirs will be 725)

I am a registered entrant of The 2010 Trident Engineering Welsh Championship & my Championship registration no. is
I am a registered entrant of The 2010 Sevenoaks & District Speed League & my Championship registration no. is
I am a registered entrant of the Richard Egger Insurance / HSA Speed Championship, my Championship registration no. is

(Now P.T.O & sign declaration)

GENERAL DECLARATION TO BE COMPLETED BY ALL ENTRANTS AND DRIVERS

I enclose Cheque/Postal Order made payable to Swansea Motor Club for £85 per driver
Please enclose a separate cheque/PO for this entry and do not incorporate with any other items.

PLEASE SIGN THIS FORM WHERE INDICATED

(i) Held under the General Regulations of the Motor Sports Association Ltd (incorporating the provisions of the International Sporting Code of the FIA) and these supplementary regulations.

(ii) Every entrant, driver and passenger, before taking part in any competition, must sign an undertaking as follows:

I declare 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. 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.

(iii) Every entrant shall sign the following declarations:

I declare 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.

(iv) Every driver taking part in a speed event shall sign a declaration in the following form:

"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 license which permits me to do so".

Drivers Signature..... Date

Entrant (if different) Signature.....Date.....

PLEASE ENCLOSE 3 SELF-ADDRESSED LABELS FOR CONFIRMATION OF ENTRY, TICKETS & RESULTS or 2 SELF-ADDRESSED LABELS if you have provided an email address

***If an entrant is under 18 years of age, THIS FORM MUST BE COUNTERSIGNED BY THE APPROPRIATE PARENT OR GUARDIAN.**

THIS ENTRY IS MADE WITH MY CONSENT. PARENT OR GUARDIAN OF DRIVER.

Full Name..... Relationship to Driver.....

Address.....

Signature..... Date

Please give the Name, Address and Telephone Number of a friend or relative who can be contacted in the event of an emergency.

Name..... Tel .No.....

Address..... Will this person be at the Meeting? Yes/NO

If not please give the Name and Mobile number of person to be contacted at the Meeting.

Name..... Tel .No.....

Date Received Cheque	Checked for signature & correctness	Acknowledged