

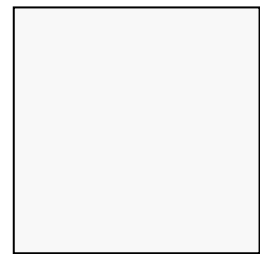


Oulton Park Gold Cup 2016

Saturday 27th August – Monday 29th August 2016

ENTRY FORM

Entries Open Wednesday 15th June 2016
Entries Close: 17.00 Friday 5th August 2016



Name & Address

Home Telephone:
Work Telephone:
Fax Number:
Mobile Number:
e-mail:
MSA Comp Licence Number
MSA licence grade
Driver under 18? YES / NO

Qualifying Saturday 27 th Racing Sunday 28 th August 2016	Entry Fee	Tick
Historic Road Sports: Qual Sat 15 mins. Race Sun 20 mins.	£275	
70s Road Sports: Qual Sat 15 mins. Race Sun 20 mins.	£275	
Guards Trophy GT Cars: Qual Sat 25 mins. Race Sun 40 mins.	£510	
Guards Trophy SR Cars: Qual Sat 25 mins. Race Sun 40 mins.	£510	
HSCC Super Touring Cars: Qual Sat 20 mins Race 1 Sun 20 Mins, Race 2 Mon 20 mins	POA	
Derek Bell Trophy: Qual Sat 20 mins. Race 1 Sun 20 mins. Race 2 Mon 20 mins.	£470	
HSCC/FJHRA Silverline Historic Formula Junior Front Engine: Qual Sat 15 mins. Race 1 Sun 20 mins, Race 2 Mon 20 Mins	£430	
HSCC/FJHRA Silverline Historic Formula Junior Rear Engine: Qual Sat 15 mins. Race 1 Sun 20 mins, Race 2 Mon 20 mins	£430	
Jaguar Classic Challenge. Qual Sat 25 mins. Race Sun.40 mins	£510	
HGPCA Historic G.P. Cars: Qual Sat 15 Mins Race 1 Sun 20 Mins, Race 2 Mon 20 Mins	POA	
Monday 29th August 2016		Tick
HSCC/HRSR ByBox Historic Touring Cars: Qual 15 mins 2 Races 20 mins ea All on Mon	£430	
Historic Formula Ford: Qual 15 mins. 2 Races 20 mins each. All on Monday.	£430	
Classic Racing Cars with URS FF2000 : Qual 15 mins Race 20 mins All on Monday	£275	
Historic Formula Ford 2000: Qual 15mins 2 Races 20 mins Each All on Monday	£430	
Classic Clubmans. Qual 15 mins. Race 20 mins All on Monday.	£275	

NB: This may not be the order in which races will run - see final instructions

SECOND DRIVER or ENTRANT'S DETAILS (If different from driver)

NAME:	ADDRESS:	
POST CODE:		
Telephone Number:	Fax Number:	Entrant's Licence Number:

Address for Tickets/Passes etc: ENTRANT or DRIVER

CAR DETAILS

Race Entered	Car Make	Car Model	Class	Year of manufacture
<i>Colour</i>	<i>Engine capacity</i>	HSCC VIF YES NO	FIA VIF YES NO	<i>Normal competition</i>
Transponder number				

Details of person to be informed in the event of a serious accident:

This entry form is not valid unless this section is filled in.	ADDRESS:
POST CODE:	Telephone:

The General Declaration and Payment Details sections below **MUST** be completed by all Competitors **PRIOR** to submission.

The Meeting will be held under the General Regulations of The Motor Sports Association, (incorporating the provisions of the International Sporting Code of the FIA), and any written instructions that the organising Club may issue for the event.

GENERAL DECLARATION TO BE COMPLETED BY ALL DRIVERS (AND ENTRANTS)

- 1 I have 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 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 have any connection with the promotion and/or organisation and/or conduct of the event are insured against loss or injury caused through negligence.
- 2 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.
- 3 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 licence which permits me to do so.
- 4 I undertake that at the time of the event to which this entry relates I shall have passed or am exempt from an ASN specified medical examination within the specified period.

Has Driver competed at this circuit before? YES / NO. *

*Please delete as appropriate

SIGNATURES: This entry form is not valid unless the driver has signed below.

Driver	Date:
Entrant:	Date:

Any indemnity and or declaration prescribed above which is signed by a person **who has not reached his or her 18th birthday** must be countersigned by that person's parent or guardian:

Driver under 18? <i>Yes/No</i>		Entrant under 18? <i>Yes/No</i>	
Parent/Guardian Full Name:	Relationship:		
Address:			
Postcode:	Telephone:		
Signature:	Date:		

PAYMENT DETAILS / METHOD

Please send a cheque for the amount due or fill in your Visa / Mastercard / Debit card information below

Total due: £.....
 Less £50 for each additional Race entered

Acknowledged	
Banked	
Reference	

Card Number:																			
Start Date:					Expiry Date:					Issue No:									
Name on Card:											3 digits on reverse								

Signed: _____

To compete in an HSCC Championship race you must be an HSCC Member
 This entry form should be read in conjunction with the HSCC Standard Race Regulations issued on 31st January 2014. Available from the HSCC office or www.hsc.org.uk.
Historic Sports Car Club Ltd, Silverstone, TOWCESTER, NN12 8TN
Tel: 01327-858400 Fax: 01327-858500