

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? Yes/No Entrant under 18? Yes/No

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 2016 Available from the HSCC office or www.hsc.org.uk. Email office@hsc.org.uk

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