

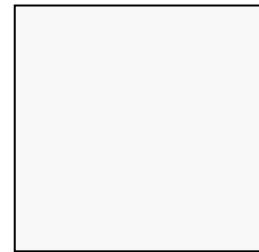


# Oulton Park Gold Cup 2017

## Saturday 26<sup>th</sup> August – Monday 28<sup>th</sup> August 2017

### ENTRY FORM

Entries Open Friday 23<sup>rd</sup> June 2017  
Entries Close: 17.00 Wednesday 9<sup>th</sup> August 2017



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 26 <sup>th</sup> Racing Sunday 27 <sup>th</sup> August 2017	Entry Fee	Tick
<b>Historic Road Sports:</b> Qual Sat 15 mins. Race Sun 20 mins.	£285	
<b>70s Road Sports:</b> Qual Sat 15 mins. Race Sun 20 mins.	£285	
<b>Guards Trophy GT Cars:</b> Qual Sat 25 mins. Race Sun 40 mins. Pit Stop Race	£525	
<b>Guards Trophy SR Cars:</b> Qual Sat 25 mins. Race Sun 40 mins. Pit Stop Race	£525	
<b>TCRE Super Touring Cars:</b> Qual Sat 20 mins Race 1 Sun 20 Mins, Race 2 Mon 20 mins	POA	
<b>Derek Bell Trophy:</b> Qual Sat 20 mins. Race 1 Sun 20 mins. Race 2 Mon 20 mins.	£485	
<b>HSCC Historic Formula 2</b> Qual Sat 20 mins. Race 1 Sun 20 mins, Race 2 Mon 20 Mins	£485	
<b>HSCC Historic Formula Ford A &amp; B:</b> Qual Sat 15 mins, Race 1 Sun 20 mins, Race 2 Mon 20 mins	£445	
<b>Jaguar Classic Challenge.</b> Qual Sat 25 mins. Race Sun.40 mins Pit Stop Race	£525	
<b>Monday 28<sup>th</sup> August 2017</b>		<b>Tick</b>
<b>HSCC/HRSR ByBox Historic Touring Cars:</b> Qual 15 mins 2 Races 20 mins ea All on Mon	£445	
<b>HSCC/FJHRA Historic Formula Junior:</b> Qual 15 mins. 2 Races 20 mins each. All on Mon.	£445	
<b>Classic Racing Cars:</b> Qual 15 mins Race 20 mins All on Monday	£285	
<b>Classic Clubmans.</b> Qual 15 mins. Race 20 mins All on Monday.	£285	
<b>Motor Racing Legends Historic Touring Car Challenge:</b> Qual 25 Mins Race 50 Mins All on Monday	POA	

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
Colour	Engine capacity	HSCC VIF    YES    NO	FIA VIF       YES    NO	Normal competition
<b>Transponder number</b>				

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

<b>This entry form is not valid unless this section is filled in.</b>	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? 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 31<sup>st</sup> January 2017. Available from the HSCC office or [www.hsc.org.uk](http://www.hsc.org.uk).  
**Historic Sports Car Club Ltd, Silverstone, TOWCESTER, NN12 8TN**  
**Tel: 01327-858400 Fax: 01327-858500**