

## Donington Historic Festival Friday 3<sup>rd</sup> May – Sunday 5<sup>th</sup> May 2019



## **Entry Form: Jaguar Classic Challenge Race**

Name & Address:		Home Telephone:								
		Work Telephone:								
		Mobile:								
		Fax:								
		E-Mail Add	E-Mail Address:							
		Comp Licer	Comp Licence No:							
		Grade:								
AND ONE 60	PROVISIONAL TE QUALIFYING MINUTE PIT STO	SESSION ON P RACE ON	FRID							
SECOND DRIVER OR ENTRANT'S D  Name:	from Driver) Address:									
Name.		Address.								
			Posto	code:						
Telephone Number:	Fax Number:			Entrant's Licence Nu				mber:		
Address for Tickets/Passes etc: Entrant or	· Driver									
CAR DETAILS	- Bilvei									
Race Entered: JCC Class:	<b>Car</b> : Make:	Model	Model:				Manufactured:			
Engine Capacity: Colour:	_ VIF's: HSCC:	Yes/No FIA: Yes/No Competition Number:								
Transponder Number:										
Details of person to be informed in the ever	nt of a serious accider	nt: This entry fo	orm is no	ot valid un	less thi	s sectio	on is filled i	n.		
Name: Phone Number:										
Entry Fee due: £1,100 Entries Close PAYMENT DETAILS Please note we	-		ansfers	s from U	J <b>K</b> or	Euro	pe			
Mastercard Visa Switch		, ~ ••	1				<del></del>			
Card number										
Security number (last 3 digits on reverse of card)	Expiry date		Start da	ite			Issue no.			
Signed:	Date:									

Please return this entry form to:



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 Motorsport UK, (incorporating the provisions of the International Sporting Code of the FIA), and any written instructions that the organising Club may issue for the event

- 1. I declare that I have been given the opportunity to read the General Regulations of the Motorsport UK 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 (M.UK Yearbook D13.1).
- 2. 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.' (H.10.1.6).

## 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.

Billedi		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? Y	es/No					
Parent/Guardian Full Name:	Relationship:						
Address:							
Postcode:	Telephone:						
Signature:	Date:						