

Signed:

HSCC Croft Retro and Classic Weekend

Saturday 3rd August – Sunday 4th August 2019 **ENTRY FORM**

Entries Open: Wednesday 12th June 2019 Entries Close: Friday 12th July 2019

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HSCC Historic Road	Sports Saturo	day 15 l	Mins Qualif	ying & l	Race 1	. Sunday I	Race 2 –	both ra	aces		
are 20 mins each 1. if 70s Road car – contac 2. If Guards Tr	t HSCC office	for cop	y <mark>before</mark> en	itering)	ÖR					£99	
HSCC 70s Road Spr mins each (if HRS race already office for copy before	entered subje				•					£99	
CAR DETAILS Race Entered	Car Mak	e	Car	Model		Class			Year	of manus	acture
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Colour Transponder nu		acity	HSCC VIF	YES	NO	FIA HTP	YES	NO			
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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.

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

- I have read the General Regulations of the Motorsports UK 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.
- 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.
- 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.
- 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

Driver

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

Entrant:	Date:			
Any indemnity and or declaration prescribed above which	ch is signed by a person <i>who has not reached his or her</i>			
18th birthday must be countersigned by that person's p				
Driver under 18? Yes/No	Entrant under 18? Yes/No			
Parent/Guardian Full Name:	Relationship:			
Address:				
Postcode:	Telephone:			
Signature:	Date:			

Date:

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 2019 Available from the HSCC office or www.hscc.org.uk. Email office@hscc.org.uk

Historic Sports Car Club Ltd, Silverstone, TOWCESTER, NN12 8TN Tel: 01327-858400 Fax: 01327-858500