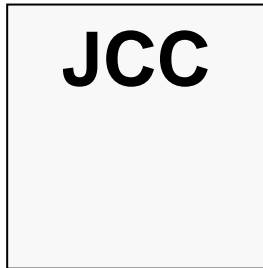




# Thrupton Historic

## Saturday 6<sup>th</sup> – Sunday 7<sup>th</sup> June 2020



### Entry Form: Jaguar Classic Challenge Race

Name & Address:

Home Telephone:
Work Telephone:
Mobile:
Fax:
E-Mail Address:
Comp Licence No:
Grade:

**PROVISIONAL TIMETABLE. TBA**  
**Qualifying 30 Mins Sunday 7th June**  
**Race 60 Mins Sunday 7th June**

**SECOND DRIVER OR ENTRANT'S DETAILS (If different from Driver)**

Name:		Address:	
		Postcode:	
Telephone Number:	Fax Number:	Entrant's Licence Number:	

Address for Tickets/Passes etc: Entrant or Driver

**CAR DETAILS**

**Race Entered:** JCC      Class: \_\_\_\_\_ **Car:** Make: \_\_\_\_\_ Model: \_\_\_\_\_ Manufactured: \_\_\_\_\_

Engine Capacity: \_\_\_\_\_ Colour: \_\_\_\_\_ **VIF's:** HSCC: Yes/No    FIA: Yes/No    **Competition Number:**

Transponder Number:
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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.	
Name:	Phone Number:

**Entry Fee due: £995 Entries Close Friday 15<sup>th</sup> May 2020**

**PAYMENT DETAILS Please note we will not accept any bank transfers from UK or Europe**

Mastercard	Visa	Switch																																	
Card number	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td> </tr> </table>																																		
Security number (last 3 digits on reverse of card)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td> </tr> </table>						Expiry date	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td> </tr> </table>							Start date	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td> </tr> </table>							Issue no.												

Signed:	Date:
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Please return this entry form to:



**HISTORIC SPORTS CAR CLUB Ltd. SILVERSTONE CIRCUIT, TOWCESTER.**  
**NORTHANTS. NN12 8TN. ENGLAND - Tel: 01327-858400 Fax: 01327-858500**  
**E-mail: office@hsc.org.uk**

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.**

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	
<b>Parent/Guardian Full Name:</b>	<b>Relationship:</b>
<b>Address:</b>	
<b>Postcode:</b>	<b>Telephone:</b>
<b>Signature:</b>	<b>Date:</b>