

Entry Form: SE INT814

Quaife Intermarque Championship

At Brands Hatch (Indy) on Saturday 1 and Sunday 2 November 2014

Entry Fee: £315. Closing Date Wednesday 15 October 2014 If received by this date fee will be reduced to £290

Personal Details: Please complete in BLOCK CAPITALS

Name of Entrant/Driver:.....
Comp licence no:..... Grade:.....
BARC Membership number:.....
Address:.....
County..... Postcode.....
E-mail address.....
Home:..... Mobile:..... Work:.....

Next Of Kin:..... Relationship:.....
Address.....
Home..... Mobile.....

Vehicle Details

Make:..... Model:..... CC.....
Make/tuner of Engine..... Transponder No.....
Colour..... Super/Turbo..... Year.....
Class..... Car No.....

Declaration

I declare that I have been given the opportunity to read the General Regulations of the Motor Sports Association 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 and competent to take part in the event. I understand that motorsport is 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 these risks.

In consideration of the acceptance of this entry I agree that neither any one of or any combination of the MSA and its associated clubs, the organisers, the track owners or other occupiers, the promoters and their respective officers, servants, representatives and agents (The "Parties") shall have any liability for loss or damage which may be sustained or incurred by me as a result of participation in the Event. Nothing in this clause is intended to or shall be deemed to exclude or limit liability for death or personal injury. To the fullest extent permitted by law I agree to indemnify and hold harmless each of the Parties in respect of any loss or damage whatsoever and howsoever arising from my participation in the Event.

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 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. H10.1.6.

Any application form for an entry which is signed by a person under the age of 18 years shall be countersigned by that person's parent or guardian, whose full name and address has been given below. If I am the parent or guardian of the driver I understand that I shall have the right to be present during any procedure being carried out under the Supplementary Regulations issued for this event and the General Regulations of the MSA.

I confirm that I have acquainted myself with the MSA General Regulations, agree to pay any appropriate charges and fees pursuant to those Regulations (to include any appendices thereto) and hereby agree to be bound by those Regulations and submit myself without reserve to the consequences resulting from those Regulations (and any subsequent alteration thereof). Further, I agree to pay as liquidated damages any fines imposed upon me up to the maxima set out in Part 3, Appendix 1.

Signature of Driver..... Signature of Entrant..... Date.....

Age if UNDER 18..... Important: Any indemnity and/or declaration as prescribed by the paragraphs above which is signed by a person under the age of 18 shall be countersigned by that person's parents or guardian, whose full name & address is given below

Name of Parent/Guardian..... Signature of Parent/Guardian.....
Full Address.....

Has the driver raced before? Yes/No At this circuit in the current format? Yes/No

Payment Details

No entry will be accepted unless accompanied by the correct entry fee, shown at the top of this form, cheques to be made payable to **BARC SEC**. If you wish to pay by credit or debit card then you need to enter online at www.barc.net. If you wish to pay by BACS transfer Lloyds, BARC SEC Sort code: **30-90-84, Acc No. 01263758. Please use your name as a reference.**

Do you wish to make a donation to the marshals' fund? If so please confirm how much
Please combine this donation with your entry fee and make one payment.

Return to: Howard Smith, 60 Algernon Road, Loughton, Essex IG10 4NG. Tel: 020 8508 1567 or 07949 117 350.