

QMS ENTRY FORM

Please return your entry form and payment to: Kelly Dann, Entry Secretary, 4 Lombardy Drive, Woodlands, Vinters Park, Maidstone, Kent. ME14 5TA, tel: 07887 797185. Email: kjdann78@googlemail.com

DRIVER DETAILS

First Name:..... **Surname:**.....

Address:.....

..... **Post Code:**.....

Licence Grade:..... **Licence No:**.....

Date of Birth:..... **BARC Member no:**.....

Hometown:.....

Phone Home:..... **Work:**..... **Mobile:**.....

Email address:.....

Can you print 'E' tickets yes or no? YES NO

VEHICLE DETAILS: Make of car:..... Type/Model:.....

CAR NUMBER:

Transponder Number:..... **C.C:**..... **Class:**.....

Entrant/Sponsor/Team Names:

Make/Tuner of Engine:..... **Colour:**

PERSON TO BE NOTIFIED IN THE EVENT OF SERIOUS ACCIDENT

Name:	Relationship to Driver:
Telephone Numbers:	
Address:	

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.

Payment methods:

Would you like to make a donation to the 'Marshals fund' **Amount Donated**

Cheques to be made payable to BARC SEC or
Alternatively by BACS Sort Code: 30-90-84 Account number: 01263758
Please use your Surname as reference, payments should be received by the closing date together with this form.
Entry will only be accepted if this form is filled in completely and the correct payment received by the closing date.

DRIVER SIGNATURE :.....DATE:.....

Age if under 18 any indemnity and/or declaration as described by the paragraphs above which is signed by a person under the age of 18 shall be countersigned by that persons parent or guardian, whose full name and address is given below.

Name of parent signature of parent
/guardian */guardian*

FULL ADDRESS