



VSCC SPEED CHAMPIONSHIP ROUND 4 SHELSLEY WALSH HILL CLIMB 1stJULY 2018

Held under the General Regulations of the Motor Sports Association Ltd. (incorporating the provisions of the International Sporting Code of the FIA) and the Supplementary Regulations.

Closing Date 1st June 2018

Driver's Name:Membership Number
Address:
Date of Birth (if under 18): / Email:
Daytime/Mobile Telephone Number:
Competition Licence: (delete two) National A (open) / National A / National B Licence No:
Do you hold a valid road traffic licence? YES/NO
I wish to enter in Class: Make of Car: Model: Model:
Year: Engine Capacity: cc Make of Engine:
Is the car self starting? YES / NO If NO, please give details:
Supercharged? Yes/No Turbocharged? Yes/No
DUAL DRIVES ONLY
Car will also be driven by (separate entry form required):
Which driver runs out of class order?
If the second entry is not accepted, does this one still stand? YES /NO

IMPORTANT – EMERGENCY CONTACT NUMBERS		
Name: Phone	Number:	
Name: Phone	Number:	
I agree to accept the rules, regulations and conditions for this event.		
Driver signature	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 these events and agree to be bound	
TROPHIES AND AWARDS	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	
Are you under 24 years of age on day of event Yes/No	potential risk inherent with motor sport and agreed to accept that risk.	
Are you over 60 years of age on day of event? Yes/No	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	
I enclose entry fee of: £145.00	personal injury or other loss and I acknowledge and accept these risks. In consideration of the acceptance of the entry (or entries) I agree that neither any one of the combination of the MSA and its	
Camping Fee: £10.00	associated clubs, the organisers, the track owners, or other occupiers, the promoters and their respective officers, servants,	
TOTAL ENCLOSED: £	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 including but not limited to	
Cheque Debit Card Credit Card	damage to the property, economic loss, consequential loss or financial loss howsoever caused. 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	
Please note that Credit Cards are subject to a 2% handling fee	indemnify and hold harmless each of the Parties in respect of any loss or damage whatsoever and however arising from my participation in this event.	
Please make cheques payable to 'Midland Automobile Club Ltd'	I understand that should I at any 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	
Card Number:	take part unless I have declared such disability to the ASN which has, following such declaration, issued a license which permits me to do so.	
Security Code: Valid From:	Expiry Date:	
/	/	
Please return to: Robin Webb, Midland Automobile Club, Sh	nelslev Walsh Hill Climh Shelslev Walsh	
Worcester, WR6 6RP Phone: 01886 812211	Email: robin@mac1901.co.uk	
THIS SECTION TO BE COMPLETED IF THE DRIVER IS UNDER 18 YEARS OF AGE as MSA REGULATION A34 (C) I am the Parent/Legal Guardian/Guarantor (delete as appropriate) of the Driver named overleaf and I understand that I or my Guarantor shall have the right to be present during any procedure being carried out under the General Regulations of the Motor Sports Association. The entry overleaf is made with my support and I or my representative (who will produce my written and signed authorisation to so act) will attend the event and sign on as Entrant. PARENT, LEGAL GUARDIAN OR GUARANTOR (Please use block capitals):		
Full Name:		
Address:		
BE AWARE THAT BY SIGNING ON AT THE EVENT YOU ARE ENTERING INTO A LEGALLY BINDING CONTRACT		