2014 BIGprofile Sports 2000 Enduro SeriesPLEASE WRITE IN BLOCK CAPITALS AND COMPLETE ALL SECTIONS

SECTION 1	– DRI\	/ER DE	TAILS													
Driver Na	me															
Driver Addı	ess														司	
Licence Grade		Licence No						Issued by								
Date of Birth		Club Mem No						Home Town								
Phone: Home					Work					Mobile	!					
Email Addre		ease indicate below any prescribed drugs or conditions which should be notified to the Medical Team														
	Please	e indicat	te below	any preso	cribed dr	ugs or cond	itions wh	ich s	hould b	e notif	ied to the	Medica	l Team			
SECTION 2	– VEH	ICLE D	ETAILS													
					Make o	f Car										
Car Numb		r				Type/M	odol						66		=	
Tunnanandan						••	<u> </u>				7		cc [=	
Transponder N						Class						Year			\dashv	
Sponsor Details SECTION 3 – EVENT DETAILS																
SECTION 3	- EVE	NI DEI	AILS	_			-									
					Enduro	Entry Fees			Ente	ering (p	lease tic	k √)				
				Duratec	Pinto	Historic	Crossle	ı	Duratec	Pinto	Historic	Crossle		Yes		
May 10/11		Brands F	latch	£375 (5	0 min race	with pit stop)							time cuit?			
August 2/3		Pembrey		£375 (1	•					l	Is this your 1 st time acing at this circuit?					
				free entry into sprint race + free H Roast Sat eve).							his yo					
October 4/5		Dijon		£375 (3	0min quali	& 2 x 30min ra	aces)					l	ls 1 raci			
								_								
		N	lame and	d Address	of Relati	ve to be No	tified in t	the E	vent of	a Serio	us Accide	ent				
Name					R	elationship					lephone					
Address						•									=	
1. I declare I have be																
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 event and the potential risk inherent with motorsport and agree to accept that risk. 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 any time of this event be suffering from any disability whether permanent or temporary which is likely to affect prejudicially my										nt having icially my						
normal control of the 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. Any application form for a licence which was signed by a person under the age of 18 years was countersigned by that person's parent/guardian/guarantor, whose full names and address have been given. 5. If I am the parent/guardian/guarantor understand that I 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. As the Parent/Guarantor I										e driver I uarantor I						
confirm that I have acquainted myself with the MSA Regulations, agree to pay any appropriate charges and fees pursuant to those regulations (to include any appendices thereto) and hereby agree to be 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 and fines impose the maxima set out in Part 3, Appendix 1. 6. I hereby agree to abide by the MSA Child Protection Policy and Guidelines.									•							
Driver Signature								Date								
Age if Under	10	Ar	y indemn	ity and/or	declaration	on as describ	ed by the _l	parag	graphs al	oove wh	ich is sign	ed by a p	erson ur	nder the a	ge of	
Age II Under	10		18	shall be co	untersign	ed by that pe	erson's par	rents	or guard	lian, wh	ose full na	me & add	dress is l	pelow		
Name of Par	ent/Gua	ardian							Signature of Parent/Guardian							

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Continuation Sheet												
Driver Name Car No												
ECTION 4 – PAYMENT DETAILS												
Cheques to be made payable to: SRCC or alternatively complete Debit/Credit Card details below												
Card Type Debit/Credit Card No												
Valid From Expiry Date												
Issue No (debit card only) Security Code (last 3 digits on back)												
Name on Card Signature												
NB – A surcharge of £4 will be added to the total payment if payment is made by credit card.												
ECTION 5 – ENTRANT DETAILS												
lease only complete this section if a valid Entrants Licence has been issued by your ASN. If no details are entered below, the 1 st river will be nominated as the Entrant in accordance with MSA Regulation [H 1.3]												
ntrant Name												
Entrants Licence No ASN Representative Name												
ntrant Address												
Postcode												
Phone: Home Work Mobile												
Email Address												
I declare 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 ysically 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 event and the potential risk inherent with motorsport and agree to accept that risk. 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 the course and the speeds which will be reached. 3. 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 ntrol of the 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. Any application form for a licence which was used by a person under the age of 18 years was countersigned by that person's parent/guardian/guarantor, whose full names and address have been given. 5. If I am the parent/guardian/guarantor of the driver I understand at I 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. As the Parent/Guardian/Guarantor I confirm that ave acquainted myself without reserve to the Rosal 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 bmit myself without reserve to the consequences resulting from those Regulations (and any subsequent alteration thereof). Further I agree to pay as liquidated damages and fines imposed upon me up to the maxima set tin Part 3, Appendix 1. 6. I hereby agree to abide by												
Entrant Signature Date												
ge 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 person's parents or guardian, whose full name & address is below												
ame of Parent/Guardian Signature of Parent/Guardian												
ull Address												
 Please ensure that all information is completed as if you do not do so your entry will not be accepted If submitting entry form electronically, please indicate signature by placing "X" in appropriate box Competitors are reminded that any entry not accompanied by the correct fee is NOT a valid entry. Entry fees paid on the day incur a £25 surcharge. 												
ECTION 7 – FOR OFFICE USE ONLY												
Pate Received												
Pate Acknowledged												
ntry Fee Paid Date												
Method of Payment												
mount Refunded Date												