MSVR
MotorSport Vision Racing

MSVR
2010 Mono Championship Race Meetings

Date:
(Internal use only)

Fee:
(Internal use only)

Held under the General Regulations of The Motor Sports Association (incorporating the provisions of the Inter Sporting Code of the FIA) and these Supplementary Regulations

ENTRY FORM TO BE COMPLETED IN BLOCK CAPITALS

A Separate Entry Form is Required for Each Car

ENTRIES OPEN: On Publication

Entering this race meeting entitles you to free membership of MSVR

Name of Entrant/Team/Sponsor

"AS DRIVER" or NAME*:.....

Address (for Correspondence).....

.....

.....Postcode.....

Telephone No. (Day).....Fax.....

Email Address .....

IS AN ENTRANTS LICENCE HELD IN THIS NAME? **YES / NO***
(*Delete as applicable)

Name of Driver (CAPITAL LETTERS):

.....

Nationality of Driver: .....

Permanent Residential Address of Driver:

.....

.....

Postcode:

Particulars of Entry:

Class Entered	**MONO...**	Comp No.	
Car Make/Model			
Car Colour		Car Year	
T'ponder No.			
Engine Make/Type		Cubic Capacity	

Have you raced before at **ALL** circuits entered (see circuits below)? **Yes/No**

If '**NO**' which circuit(s) entered have you **NOT** raced at?

PAYMENT DETAILS

Cheque/PO/Cash, value £.....payable to **Monoposto Racing Club**
Or: **Please debit my Mastercard/ Visa Credit/ Visa Debit/ Maestro Card**
(Please delete as appropriate, Credit Card Surcharge of £5)
with the sum of £.....

Valid From: / Expiry Date: / Iss. No. (Maestro):

3 digit security number:

GENERAL DECLARATION FOR COMPLETION BY ALL COMPETITORS

I hereby make application to participate in the National B Race Meeting(s) to be held at these circuits on the dates specified. I certify that the particulars of my entry and my vehicle as given are correct.

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 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. Further, I understand that all persons having any connection with the promotion and/or organisation and/or conduct of the event are insured against loss or injury caused through their negligence.

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.

STATE YOUR AGE IF UNDER 18 (.....years old)

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 the speeds which will be reached.

Signature of **Entrant** or **nominated representative**:		Competition Licence No.	
		ASN Issuing Licence, e.g.MSA	
Signature of **Driver** (If other than entrant):		Competition Licence No.	
		ASN Issuing Licence, e.g.MSA	

Date.....

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

Full Name of Parent or Guardian.....

Relationship..... Signature.....

Address.....

.....Postcode.....

TO BE COMPLETED BY ALL COMPETITIORS

In case of accident please contact the following:

Name..... Relationship.....

Address.....

.....Postcode.....

Telephone (Mobile).....

Please send completed entry forms and fees to:

Simon Davey, MRC Administrator
1 The Applegarth, Long Buckby, Northants, NN6 7EQ
Tel/Fax: 01327 843056 email: admin@monoposto.co.uk

Please select which races you are entering by ✓ the relevant event:

Date	Circuit	Org. Club	Entry Fee	Entering (please tick box)		
11 September 2010	Oulton Park	MSVR	SH £205	Sat		
16/17 October 2010	Silverstone National	MSVR	SH £180 DH £295	Sat	Sun	Both

DEFACED, INCOMPLETE OR AMENDED ENTRY FORMS ARE INVALID

Organised by MotorSport Vision Racing, Brands Hatch Circuit, Fawkham, Longfield, Kent DA3 8NG Tel: + (0) 1474 875 263 Fax: + (0) 1474 874766 E-mail: gemma.mole@motorsportvision.co.uk

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