

Chester Motor Club & Lancashire Automobile Club
The Three Sisters Sprint Weekend
Sunday 7th August 2011

OFFICIAL ENTRY FORM

Held under the General Regulations of The Motor Sports Association (Incorporating the provisions of the International Sporting Code of the FIA) and these Supplementary Regulations.

PLEASE USE BLOCK CAPITALS AND PRINT CLEARLY

DETAILS OF DRIVER		DETAILS OF ENTRANT	
Name		Name	
Address		Address	
Post Code		Post Code	
Tel. (Home)		Tel. (Home)	
Tel. (Mobile)		Tel. (Mobile)	
Email		Email	
Licence No.		Licence No.	
COMP. LICENCE GRADE		ARE YOU A NOVICE?	Yes/No
Do you hold or have you ever held a Driving Licence in accordance with the Road Traffic Act			Yes/No
CHAMPIONSHIPS ENTERED			
CLUB:			
Chester Motor Club Member	Yes/No	Lancashire Automobile Club Member	Yes/No
IS THIS A SHARED ENTRY?	Yes/No	2nd DRIVER'S NAME:	

PLEASE COMPLETE A SEPARATE FORM FOR EACH DRIVER

CAR DETAILS			
CLASS ENTERED:	MAKE	MODEL	
C.C.	No. of CYLINDERS	Year of Manufacture	
Is it Supercharged	Yes/No	Turbocharged	Yes/No
TYPE OF FUEL (To help Officials & Marshals in event of an accident)			
The entry fee is £105.00 (Chester Motor Club & Lancashire Automobile Members £100.00).			
PLEASE SEND THIS FORM ACCOMPANIED BY THE APPROPRIATE FEE TO THE SECRETARY OF THE MEETING. Jan M Chesters, 48, Worsley Road, Ansdell, Lytham St Annes, Lancashire. FY8 4AW			
PLEASE MAKE CHEQUES PAYABLE TO 'CHESTER MOTOR CLUB Ltd'		Amount Enclosed £	

Membership of Chester Motor Club			
Membership fee for 2011 is as follows:	Single	Joint	Junior
Competition Membership	£12.00	£19.00	FOC
Membership forms are available from http://www.chestermotorclub.co.uk or			
Bill Harris, 6 Needham Drive, Hartford, Northwich, CW8 1RW			
Membership of Lancashire Automobile Club			
£19.00 Full Member	£21.00 Full Member + Associates.		
Contact for membership: Michele Atty, 12 Breeze Road, Southport, PR8 2HG. Tel:07890 617973			
Email info@lancsautoclub.com		Website www.lancsautoclub.com	

Driver

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. 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 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.

State your age if you are under 18 years.....

Drivers Signature

Date

Entrant

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.

Entrants Signature

Date

Parent/Guardian/Guarantor

If I am the Parent/Guardian/Guarantor 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'. As the Parent/Guardian/Guarantor '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.

Note: Where the Parent/Guardian/Guarantor is not present there must be a representative who must produce a written and signed authorization to so act from the Parent/Guardian/Guarantor as appropriate.

Relationship to the Driver

Parent or Guardian of Entrant/Driver	ALL DRIVERS In case of serious accident please contact:
Name	Name
Address	Address
Post Code	Post Code
Tel.	Tel.
Signature	

Official use only

Shared Entry	Yes / No	1 Day	2 Day
Amount Paid	Date Received	Shared Entry	Car No

