

COMPETITOR ENTRY FORM –2010 Ma5da MX5 Championship (Mk1)



SECTION 1 – PERSONAL DETAILS

Drivers Name			
Drivers Address			
Email Address for receipt:			
Date of Birth			Grade
MSA Licence No			Expiry Date
Club Memb No			
Daytime Tel			
Email Address			
Hometown			
Name of Next of Kin			Tel No
Address			
Please indicate below any prescribed drugs which should be notified to the Medical Team			

SECTION 4 - PAYMENT DETAILS

****Your entry will not be processed or accepted without the correct entry fee. Cheques made payable to 'Ma5da Racing'*****

Debit Card Credit Card A handling charge of £4 will be made to all credit cards.

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Payment will be taken 21 days before the event indicated

Valid From Expiry Date

Security Code Issue No (Debit card only)

SECTION 2 - VEHICLE DETAILS

Make	Mazda	Car No
Model	MX5 Mk1	
Class	N/A	
Cc	1600cc	
Transponder No		
Sponsor Name		

SECTION 6 - DECLARATION

1. 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 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 motorsport 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. 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 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, who have, 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 of the driver I 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.

SECTION 3 – EVENT DETAILS

Please indicate below the events you wish to enter.			Please delete as appropriate		
Date	Venue	Fee	Entered	Raced Here Before	Sign Licence
10/11 April	Brands Hatch (R1,2,3)	£375		Y / N	Y / N
24/25 April	Snetterton (R4,5)	£295		Y / N	Y / N
15 May	Oulton Park Int (R6,7)	£295		Y / N	Y / N
5/6 June	Cadwell Park (R8,9)	£295		Y / N	Y / N
19/20 June	Castle Combe (R10,11)	£295		Y / N	Y / N
18 July	Mallory Park (R12,13)	£295		Y / N	Y / N
14/15 August	Silverstone GP (R14,15)	£295		Y / N	Y / N
29/30 August	Rockingham (R16,17)	£295		Y / N	Y / N
25/26 September	Croft (R18,19,20)	£375		Y / N	Y / N
1/2 October ***	Autumn Championship Silverstone GP (R1,2,3)	£595	<input type="checkbox"/>	Y / N	Y / N

Drivers Signature Date

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

Parent Signature Date

Address:

OFFICE USE ONLY

Received	Processed	Acknowledged	Entry Fee	Method

Place an X in the 'entered' box for the event you are entering or multiples to enter more than one *** Autumn Championship Includes "FREE Registration for 2011" and is a separate Championship
 Post to: Ma5da Racing, Keystone House, Spath, Uttoxeter, Staffordshire. ST14 5AE or / Fax to: 01889 560 201 or / Email to: admin@ma5daracing.com