

**CARMARTHEN MOTOR CLUB LTD.
K&N FILTERS RALLY 2001**

Indemnification Declaration

I have read the supplementary regulations issued for this event and agree to be bound by them and by the General Regulations of The MSA. In consideration of the acceptance of this entry or my being permitted to take part in this event, in respect of any parts of the event not held on a publicly adopted road, I agree to save harmless and keep indemnified The MSA, such Person, Persons or Body as may be authorised by the MSA to promote or organise this event and their respective Officials, Servants, Representatives and Agents together with other Competitors and their respective Servants, Representatives and Agents, from and against all actions, claims, costs, expenses and demands in respect of Death of or Injury to or Damage to the Property of myself, my Driver(s), Passenger(s), Mechanic(s) or associated personnel, arising out of or in connection with this entry or my taking part in this event.

I declare that the use of the vehicle hereby entered will be covered by insurance as required by the law which is valid for such part of this event as shall take place on roads as required by the law.

I understand that should the driver at the time of this event be suffering from any disability whether permanent or temporary which is likely to affect prejudicially his normal control of the vehicle, he may not take part unless he has declared such disability to The MSA who have, following such declaration, issued a licence which permits him to do so.

Signed:
Entrant _____ Date _____ State your age if under 18 _____
Driver _____ Date _____ State your age if under 18 _____
Co-driver _____ Date _____ State your age if under 18 _____

An indemnity/declaration which is signed by a person under the age of 18 years shall be countersigned by that person's parent or guardian whose full name and address shall be given.

This entry is made with my consent

Signed _____ Date _____ (Parent/Guardian of Driver)	Signed _____ Date _____ (Parent/Guardian of Co-driver)
Full name _____	Full name _____
Address _____	Address _____
_____	_____
_____	_____
Tel nr _____	Tel nr _____

Ref. Nr.	Date received	Acceptance/ refusal sent	Payment details	Comp. Number

ENTRANT/SPONSOR

Name _____ Licence Nr _____

Address _____

DRIVER

Christian Name _____ Surname _____

Address _____

_____ Post Code _____

Telephone Nr(s) _____ Comp Licence Nr _____

Motor Club _____

NEXT OF KIN:

Name _____ Relationship _____

Address _____ Tel Nr: _____

CO-DRIVER

Christian Name _____ Surname _____

Address _____

_____ Post Code _____

Telephone Nr(s) _____ Comp Licence Nr _____

Motor Club _____

NEXT OF KIN:

Name _____ Relationship _____

Address _____ Tel Nr: _____

VEHICLE AND CLASS

Make and Model: _____

Engine Capacity: _____ Colour: _____

Forced Induction: YES/NO Number of valves per cylinder: _____

4 wheel Drive: YES/NO Number of camshafts (per bank): _____

Vehicle reg nr: _____ Class entered: _____

ADDITIONAL INFORMATION

Ladies/mixed crew

YES/NO

FEES

Entry fee	140.00
C.M.C. Membership - Driver to 31st Dec 2002	5.00 <input type="checkbox"/>
C.M.C. Membership - Co-driver to 31st Dec 2002 (Please tick which paid for)	5.00 <input type="checkbox"/>
TOTAL £	----- -----

Please enclose cheque(s)/postal order(s) totalling the above amount, made payable to CARMARTHEN MOTOR CLUB LTD. Post dated cheques will not be accepted.

SEEDING INFORMATION (Last 3 years only)

Please enter below details of driver's best performance in Stage Rallies (As a first named driver).

EVENT	STATUS & CHAMPIONSHIP	YEAR	START NR.	POSITION	
				OVERALL	CLASS

N.B. Any entrant falsely declaring or withholding information may forfeit their entry fee and have their entry refused.

THE ENTRY FORM MUST BE COMPLETED IN EVERY RESPECT - INCLUDING SIGNING THE INDEMNIFICATIONS and sent to the Entries Secretary:
Ryland James, Cartref, Bethlehem Road, Pwll Trap, St Clears, Carmarthen, SA33 4AN.

Telephone: 01994 230966 (1900 - 2100 hours only please)

Please enclose 3 completed labels to be used on correspondence.

Correspondence to Driver/Co-driver (Delete as appropriate)

e-mail address (if any): _____