



Race Entry Form 2011

MEETING DATE									
DRIVERS NAME:									
ADDRESS									
				POSTCODE					
CONTACT TEL No.					COMPETITION LICENCE No.				
BDKC MEMBERSHIP NUMBER									
IF NOT BDKC MEMBER PLEASE STATE CLUB									
NOVICE	YES/NO	REQUESTED RACING No.			1 st	2 nd	3 rd		
CLASS				ENGINE			CHASSIS		
TRANSPONDER NUMBER								Please use one box for each number	

I have read the supplementary regulations issued for this event and agree to be bound by them and the general competition rules of the Motor Sports Association. In consideration of the acceptance of this entry or of my being permitted to take part in this event. I agree to save harmless and keep indemnified and respective officials, servants, representatives and agents from and against all claims, expenses and demands in respect of death or injury to myself however so caused arising out of my taking part in this event, and notwithstanding that the same may have been contributed to or occasioned by the negligence of the said bodies, their officials, representatives or agents other than the event on ground where third party insurance under the road traffic act is not compulsory this agreement shall in addition to the parties named above extend to all and any other competitors and their servants and agents to all actions, claims, costs expenses and demands in adjudged guilty of reckless driving under the said general competition rules. The information entered on this form will be stored in a computer system by the Secretary of the Meeting for the use of the club in administration of events.

My age is _____ (If applicable, state "over 18 years")

I declare that to the best of my belief the driver(s) posses(es) the standard of competence necessary for the event of the type to which this entry relates and that the kart entered is suitable and roadworthy for the event having regard for the cause and speeds that will be reached.

I understand that should I at this event be suffering from any disability or illness, whether permanent, temporary or otherwise, which is likely to affect prejudicially my normal control of my automobile, I may not take part unless I have declared such disability to the Motor Sports Association who have following such declaration issued a licence which permits me to do so (see MSA blue book ruling).

Signature							
The person's parent or guardian, whose full name and address must be given, must countersign any entry, which is signed by a person under 18 years of age.							
Name				Signature			
Address							

TO BE FILLED IN BY ALL COMPETITORS

Next of Kin Name		Relationship	
Address			
E mail address		Tel No.	

Please Note: the race secretary should receive Race entries at least 7 days in advance of the race day. However late entries by telephone can be accepted at an extra charge of £20.00 at the race secretary's discretion (to be paid in full on race day) and the driver will be placed at the back of the grid for the heats. Credit card payments can now be accepted

All sections must be completed. Failure to do so may lead to exemption from race meeting.

Make cheques payable to "R L CIRCUITS LTD"

Club Members: £43.00 Non Members: £51.00

All Entries To:

R L Circuits Ltd
Benacre Road, Ellough, Beccles
Suffolk, NR34 7XD
Tel 01502 717718, e-mail: enquiries@elloughparkraceway.co.uk