



www.rathfrilandmotorclub.com

# RATHFRILAND MOTOR CLUB McGRADY INSURANCE DOWN RALLY ENTRY FORM

(PLEASE COMPLETE IN BLOCK CAPITALS)  
THE DOWN RALLY 26th NOVEMBER 2005

Official use only.

ENTRANT.....	Comp Lic No.....
<b>DRIVER</b> .....	RMC M'ship No.....
ADDRESS.....	Comp Lic No.....
.....	<b>E-mail</b> .....
.....	.....
POST CODE .....	Tel No. ....
<b>CO-DRIVER</b> .....	RMC M'ship No.....
ADDRESS.....	Comp Lic No.....
.....	<b>E-mail</b> .....
.....	.....
POST CODE .....	Tel. No. ....

CAR MAKE..... MODEL..... Cubic Cap.....  
 REG NO..... Class Entered..... Valves per cylinder.....  
 PREDOMINANT COLOUR OF CAR.....

**Correspondence to be sent to** \* Driver / Navigator (\*delete as necessary)  
**Refund to be sent to** \* Driver / Navigator (\*delete as necessary)

## Emergency Contact Details

IMPORTANT! Please enter Name/address/Phone no of person to be informed in case of serious accident:-  
 Driver: -.....  
 Co-Driver:- .....

## Insurance

I will be using my \*own/Alexander Forbes Insurance. (\*delete as necessary)  
 Own Insurance Company..... Policy No. ....

## Medical

**Please attach, in a sealed envelope and marked 'for the attention of Doctor', any medical details which should be brought to the attention of the Doctor, in case of accident, prior to the event. E.g. allergies to certain drugs; asthmatic etc. This will be destroyed after the end of the event.**

# FEES AND DECLARATIONS.

<b>I enclose fees as follows:</b>	<b><u>Sterling.</u></b>		<b><u>Euro.</u></b>	
ENTRY FEE (early) Before Wed. 9 <sup>th</sup> Nov.	<b>£240</b>	.....	<b>€ 345</b>	.....
ENTRY FEE (late) After Wed. 9 <sup>th</sup> Nov.	<b>£275</b>	.....	<b>€ 395</b>	.....
INSURANCE	<b>£19.80</b>	.....	<b>€29</b>	.....
% INSURANCE LOADING (if applicable)		.....		.....
2005/2006 CLUB MEMBERSHIP (driver)	<b>£10</b>	.....	<b>€ 15</b>	.....
2005/2006 CLUB MEMBERSHIP (co-driver)	<b>£10</b>	.....	<b>€ 15</b>	.....
	<b>TOTAL</b>	.....	<b>TOTAL</b>	.....

Cheques should be crossed and made payable to **Rathfriland Motor Club Ltd.** Do not send cash in the post!

Secretary of the meeting to whom all entries should be sent is:

**Rathfriland Motor Club Ltd, Down Rally 2005, 9 Montague Park, Tandragee, Co. Armagh. BT62 2NU.**

Tel. +44(0)77538 46734 Fax. +44(0)28 4065 0379. [downrally@rathfrilandmotorclub.com](mailto:downrally@rathfrilandmotorclub.com)

[www.rathfrilandmotorclub.com/downrally](http://www.rathfrilandmotorclub.com/downrally)

**INDEMNITIES, DECLARATION AND UNDERTAKINGS BY ENTRANTS, DRIVERS AND PASSENGERS**

1. I have read the Supplementary Regulations issued for this event and agree to be bound by these and the general regulations of the Motor Sports Association Ltd. 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 the Motor Sports Association Ltd., such person, persons or body which may be authorised by the Motor Sports Association Ltd. to promote or organise this event and their respective officials, servants, representatives and agents from and against all actions, claims, costs, expenses and demands in respect of death or injury to myself, howsoever caused, arising out of, or in connection with this entry or 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, servants, representatives or agents.

Furthermore in respect of any parts of this event on ground where Third Party insurance is not required by Law this agreement shall in addition to the parties named above extend to all and any other competitor(s) and their servants or agents and to all actions, claims, costs, expenses and demands in respect of loss or damage to the person or property of myself, my driver(s), Passenger(s) or mechanic(s) or associated personnel.

2. I declare that the use of the car hereby entered will be covered by insurance as required by the Road Traffic Act N Ireland 1977, which is valid for such parts of the event as shall take place on the roads as defined by the Act.

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 my normal control of my vehicle, I may not take part unless I have declared such disability to The Motor Sports Association Ltd who have, following such declaration, issued a licence which permits me to do so.

4. My age is..... (If applicable state "Over 17 Years")

5. If an entrant, driver or co-driver is under 18 years of age this form must be countersigned by the appropriate parent or guardian.

6. I agree to maintain in good condition any perpetual trophies won by me, and return them to the Secretary Rathfriland Motor Club when requested to do so.

7. I agree to have any information included in this entry form may be used for publicity purposes and will be held a Rathfriland Motor Club Ltd. database.

Entrant's Signature	Driver's Signature	Co-driver's Signature
.....	.....	.....
.....	.....	.....
<b><u>Mobile Phone Number.</u></b>	.....	<b><u>Mobile Phone Number.</u></b>
Age (if under 18).....	Age (if under 18).....	Age (if under 18).....
Date.....	Date.....	Date.....

If any of the above are under 18, a Parent or Guardian must sign below

**THIS ENTRY IS MADE WITH MY CONSENT**

Name of Parent/Guardian..... Signature.....  
 Address.....

# SEEDING

**SEEDING INFORMATION** Please detail the best 5 results achieved by driver in events since 1st January 2001. These results will be checked against result lists held by the Organisers.

Type of Event	Year	Event	Class Position	O/A Position

Please give any other information you feel may assist the organisers in seeding your entry on separate paper.

**SEEDING PREFERENCE 1-15 15-30 30-45 45-60 60-75 75+**

CIRCLE OR UNDERLINE YOUR PREFERENCE.

# RECONNAISSANCE.

**PLEASE SELECT 1 OF THE FOLLOWING RECONNAISSANCE OPTIONS THAT YOU WISH TO CARRY OUT.**

**SATURDAY 12th NOVEMBER – 09:00 TO 16:30.**

**RECONNAISSANCE NOT REQUIRED.**

**If you intend to purchase Patterson Safety Notes, please indicate which type of Notes you prefer.** Safety Notes will be available for a fee at Recce sign on and at Documentation.

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# ACCOMODATION REQUIREMENTS.

**I WOULD LIKE INFORMATION ON ACCOMODATION AVAILABLE IN THE LOCAL AREA.** YES / NO

**TYPE OF ACCOMODATION I WOULD LIKE INFORMATION ON.** (if applicable) **B&B/ HOTEL**

**APPROXIMATE NUMBER OF BEDS REQUIRED.** (if applicable)

## **MEDIA INFORMATION.**

Please include any information that could be used for PR purposes about your entry. e.g. Notable recent successes, interesting car history, how long you have been competing, sponsor information, class/championship position etc.