



RATHFRILAND MOTOR CLUB PHP KILBRONEY STAGES ENTRY FORM

(PLEASE COMPLETE IN BLOCK CAPITALS)

KILBRONEY RALLY 12TH MARCH 2005

ENTRANT.....	Comp Lic No.....
DRIVER.....	RMC M'ship No.....
ADDRESS.....	Comp Lic No.....
.....	
.....	Tel No.....
CO-DRIVER.....	RMC M'ship No.....
ADDRESS.....	Comp Lic No.....
.....	
.....	Tel No.....
CAR MAKE.....	MODEL..... Cubic Cap.....
REG NO.....	Class Entered..... Valves per cylinder.....
Correspondence to be sent to Driver/Navigator	

Insurance

I will be using my own/Alexander Forbes Insurance.

Own Insurance Company Policy No.

If refund of entry fee is necessary it should be returned to:-

.....

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

Driver:-

Co-Driver:-

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.

I enclose fees as follows:

Entry Fee.....

Insurance.....

Club M'ship Driver.....

Club M'ship Co-driver.....

TOTAL

Cheques should be crossed and made payable to Rathfriland Motor Club.

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

Tom Brown 107 Burren Road DROMARA Co Down BT25 2AJ

Tel 028 9753 3282

Please ensure reverse of this form is completed and signed!

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 RAC 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 RAC Motor Sports Association Ltd., such person, persons or body which may be authorised by the RAC 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.

Entrant's Signature	Driver's Signature	Co-driver's Signature
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 INFORMATION

Please detail 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.