

Col de Ruisg

Touring Event run by East Ayrshire Car Club for the Monte Start Committee Scotland

14 January 2017

Entry Form

Driver	Navigator		
Name	Name		
Address	Address		
Postcode	Postcode		
Telephone	Telephone		
Mobile	Mobile		
E-mail	E-mail		
Age < 18	Age < 18		

All competitors must sign the Declaration on page 2. Competitors under 18 years require a Parent or Guardian to sign the Declaration on page 2.

Driver's next of kin	Navigator's next of kin		
Name	Name		
Address	Address		
Postcode	Postcode		
Telephone	Telephone		
Mobile	Mobile		
Vehicle details			
Make/model	Engine size		
Year	Reg. No		

Entry Fees

Col de Ruisg per Car £15

Cheques made payable to 'Monte Start Committee Scotland'.

Please send entry forms and cheques to the Secretary of the Event

Craig McGibbon,

1 Maberry Place,

Troon, KA10 7LA

Held under the General Regulations of The Motor Sports Association (incorporating the provisions of the International Sporting Code of the FIA) and these Supplementary Regulations

Declaration

I declare that I have been given the opportunity to read the General Regulations of the MSA UK and if any, the Supplementary Regulations to 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 motor sport and agree to accept the risk. I understand that all persons having any connection with the promotion and/or organisation of the event are insured against loss or injury caused through their negligence.

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

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

I confirm that I have read and agree to the terms of the Declaration							
Signature of driver		Age if >18	Date				
Signature of navigator		Age if >18	Date				
Consent of Parent or	Guardian if Driver and/or Navig	gator are unde	er 18 years of	age.			
Parent/Guardian of Driv	/er	Parent/Guardian of Navigator					
Name		Name					
Address		Address					
Relationship		Relationship					
Phone		Phone					
Signature		Signature					

Vou are required to sun	ply the name and address o	of the vehicle's	incurers and Incurance A	gont holow
rou are required to sup	pry the name and address o	i the verticle s	ilisuleis aliu liisulalice A	gent below
nsurance Company				
nsurance Agent				