

Lincolnshire Kart Racing Club – RACE ENTRY (2018)

M.S.A. REGISTERED - AFFILIATED TO THE A.B.K.C.

Please send all entries to:

LKRC Competition Secretary

Mrs. Julie Thornsby

3 Backmoor Road, Norton, Sheffield, S8 8LB

Telephone: 0844 800 0622

EMAIL: juliethornsby@btinternet.com

DATE OF MEETING	CLASS
NAME	ENGINE
ADDRESS	CHASSIS
	RACING No. 1 st choice 2 nd choice
	PITBAY Required £25.00 per meeting YES <input type="checkbox"/> NO <input type="checkbox"/>
	LICENCE No.
EMAIL:	ARE YOU A NOVICE? YES <input type="checkbox"/> NO <input type="checkbox"/>
TELEPHONE No.	TRANSPONDER No.
NEXT OF KIN	DO YOU NEED TO HIRE A TRANSPONDER YES <input type="checkbox"/> NO <input type="checkbox"/>
TEL No.	I AM A MEMBER OF
ENTRANT / PG Licence Holder	ENTRY FEE ENCLOSED £
ENTRANTS / PG LICENCE No.	

INDEMNITY, DECLARATION AND UNDERTAKINGS TO BE SIGNED BY ALL ENTRANTS, DRIVERS AND IF UNDER 18, A PARENT OR LEGAL GUARDIAN / GUARANTOR HELD UNDER THE GENERAL REGULATIONS OF THE MOTOR SPORT ASSOCIATION LTD. (incorporating the provisions of the international sporting code of the F.I.A and the Supplementary Regulations). I have read the Supplementary Regulations issued for this event and I agree to be bound by them and the general regulations of the M.S.A. Ltd. In consideration of the acceptance of this entry and of 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 M.S.A. Ltd and LKRC Ltd such Person, Persons or Body as may be authorised by the M.S.A. Ltd 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 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 to the best of my belief the driver possesses the standard of driving necessary for an event of this type to which this entry relates, and that the vehicle entered is suitable and roadworthy for the event having regard for the course and the speeds that will be reached. I understand that should I at the time of this event be suffering from any disability whether permanent or temporary which is likely to effect prejudicially my normal control of my vehicle. I may not take part in this event unless I have declared such disability to the ASN which has, following such declaration, issued a license which permits me to do so. I undertake that at the time of this event to which this entry relates I shall have passed the ASN specified medical examination within the specified period.

DRIVERS SIGNATURE _____ STATE YOUR AGE (IF UNDER 18) _____

ENTRANTS SIGNATURE _____

COUNTER SIGNATURE _____ Parent / Legal Guardian / Guarantor (delete as appropriate)

NAME _____ ADDRESS _____

ENTRY FEES

MEMBERS £40 ALL CHEQUES MADE PAYABLE TO: **LKRC LTD.** NON MEMBERS £55 ENTRY WITHOUT CORRECT FEE + £15.

CLOSING DATE FOR ENTRIES WEDNESDAY 11.45 PM: PRIOR TO THE RACE