

2020 SSM 2CV 24 Hour Race

REGISTRATION & EVENT ENTRY FORM

Section 1 – notes for completion:

- Please ensure that all information is completed. If you do not, your entry may not be accepted
- If submitting entry form electronically, please indicate signature by placing "X" in appropriate box
- Drivers may sign this document at the event but document must be submitted and accepted before race
- By signing and returning this form you are accepting the regulations and supplementary regulations for this event
- ALL drivers must have 'Racing membership' or 'Event membership' from the Classic 2CV Racing Club.
- BARC membership is only required for one of the 4 drivers

Section 2 – Driver details:

Driver 1:

Driver name: _____
Driver address: _____
Postcode: _____ Date of Birth: ___/___/___ Hometown: _____
Home phone: _____ Work phone: _____ Mobile phone: _____
MSA Licence number: _____ MSA Licence grade: _____ BARC No/exp: _____
Email address: _____ 2CV Racing club member no.: _____

Driver taking prescribed drugs / suffering any condition which the medical team should be notified of? _____

Person to be notified in case of serious accident: _____
Their phone no.: _____ Their address: _____

NOTE: If this driver is not a member of the Classic 2CV Racing Club then add an extra £ 60 to the final payment and the person above will be registered as an 'event member' for the 24hr race. Or the driver can join online at <https://www.2cvracing.org.uk/join-online-event/>

Driver 1 declaration:

I declare that: **1.** I have been given an opportunity to read the General Regulations of the Motor Sports Association and, if any, the Supplementary Regulations for this event and agree to be bound by them. I declare that I am physically and mentally fit and competent to take part in the event. I understand that motorsport is dangerous and accidents causing death, injury, disability and property damage can and do happen. I understand that these risks may give rise to my suffering personal injury or other loss and I acknowledge and accept these risks. **2.** To the best of my belief the driver(s) possess (es) the standard of competence necessary for an event of the type to which this entry relates and that the vehicle entered is suitable and roadworthy for the event having regard to the course and the speeds which will be reached. **3.** The use of the vehicle hereby entered is covered by insurance as required by the law which is valid for such part of this event as shall take place on roads as defined by the law. **4.** 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 prejudicially my normal control of the vehicle, I may not take part unless I have declared such disability to the ASN which has, following such declaration, issued a licence which permits me to do so. **5.** Any application form for a Licence which was signed by a person under the age of 18 years was countersigned by that person's parent/legal guardian/guarantor, whose full names and addresses have been given. **6.** If I am the Parent/Guardian/Guarantor of the driver I understand that I shall have the right to be present during any procedure being carried out under the Supplementary Regulations issued for this event and the General Regulations of the MSA. As the Parent/Guardian/Guarantor I confirm that I have acquainted myself with the MSA General Regulations, agree to pay any appropriate charges and fees pursuant to those Regulations (to include any appendices thereto) and hereby agree to be bound by those Regulations and submit myself without reserve to the consequences resulting from those Regulations (and any subsequent alteration thereof). Further, I agree to pay as liquidated damages any fines imposed upon me up to the maxima set out in Part 3, Appendix 1. **Note: Where the Parent/Guardian/Guarantor is not present there must be a representative who must produce a written and signed authorisation to so act from the Parent/Guardian/Guarantor as appropriate.** **7.** I hereby agree to abide by the MSA Child Protection Policy and Guidelines and the National Sporting Code of Conduct. **8.** I undertake that at the time of the event to which this entry relates I shall have passed or am except from an ASN specified medical examination within the specified period. (H10.1.6) **9.** I have read and fully understood the Procedure for Control of Drugs and Alcohol as contained in the MSA Yearbook Regulations H39, D35.1, G15.1.4 and have also fully familiarised myself with the information on the web sites referred to (www.ukad.org.uk and www.wada-ama.org) in particular the UK Anti-Doping Rules which have been adopted by the MSA (as amended). Further, if I am counter-signing as the Parent or Guardian of a minor then in addition to the deemed consent to the testing of that minor (Art 5.6.2) I hereby confirm that I give such consent for the minor concerned to be so tested. **Indemnity:** In consideration of the acceptance of this entry I agree that neither any one of or any combination of the MSA and its associated clubs, the organisers, the land owners or other occupiers, the promoters and their respective officers, servants, representatives and agents (the "Parties") shall have any liability for loss or damage which may be sustained or incurred by me as a result of participation in this event. Nothing in this clause is intended to or shall be deemed to exclude or limit liability for death or personal injury. To the fullest extent permitted by law I agree to indemnify and hold harmless each of the Parties in respect of any loss or damage whatsoever and howsoever arising from my participation in this event.

Driver 1 Signature: _____ Date: ___/___/___

Parent or guardian (if aged under 18):

Age (if under 18): _____ Name of parent/guardian: _____

Full address of p/g: _____

Signature of p/g: _____

Driver 2:

Driver name: _____
 Driver address: _____
 Postcode: _____ Date of Birth: ___/___/___ Hometown: _____
 Home phone: _____ Work phone: _____ Mobile phone: _____
 MSA Licence number: _____ MSA Licence grade: _____ BARC No/exp: _____
 Email address: _____ 2CV Racing club member no.: _____

Driver taking prescribed drugs / suffering any condition which the medical team should be notified of? _____

Person to be notified in case of serious accident: _____

Their phone no.: _____ Their address: _____

NOTE: If this driver is not a member of the Classic 2CV Racing Club then add an extra £ 60 to the final payment and the person above will be registered as an 'event member' for the 24hr race. Or the driver can join online at <https://www.2cvracing.org.uk/join-online-event/>

Driver 2 declaration:

I declare that: **1.** I have been given an opportunity to read the General Regulations of the Motor Sports Association and, if any, the Supplementary Regulations for this event and agree to be bound by them. I declare that I am physically and mentally fit and competent to take part in the event. I understand that motorsport is dangerous and accidents causing death, injury, disability and property damage can and do happen. I understand that these risks may give rise to my suffering personal injury or other loss and I acknowledge and accept these risks. **2.** To the best of my belief the driver(s) possess (es) the standard of competence necessary for an event of the type to which this entry relates and that the vehicle entered is suitable and roadworthy for the event having regard to the course and the speeds which will be reached. **3.** The use of the vehicle hereby entered is covered by insurance as required by the law which is valid for such part of this event as shall take place on roads as defined by the law. **4.** 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 prejudicially my normal control of the vehicle, I may not take part unless I have declared such disability to the ASN which has, following such declaration, issued a licence which permits me to do so. **5.** Any application form for a Licence which was signed by a person under the age of 18 years was countersigned by that person's parent/legal guardian/guarantor, whose full names and addresses have been given. **6.** If I am the Parent/Guardian/Guarantor of the driver I understand that I shall have the right to be present during any procedure being carried out under the Supplementary Regulations issued for this event and the General Regulations of the MSA. As the Parent/Guardian/Guarantor I confirm that I have acquainted myself with the MSA General Regulations, agree to pay any appropriate charges and fees pursuant to those Regulations (to include any appendices thereto) and hereby agree to be bound by those Regulations and submit myself without reserve to the consequences resulting from those Regulations (and any subsequent alteration thereof). Further, I agree to pay as liquidated damages any fines imposed upon me up to the maxima set out in Part 3, Appendix 1. **Note: Where the Parent/Guardian/Guarantor is not present there must be a representative who must produce a written and signed authorisation to so act from the Parent/Guardian/Guarantor as appropriate.** **7.** I hereby agree to abide by the MSA Child Protection Policy and Guidelines and the National Sporting Code of Conduct. **8.** I undertake that at the time of the event to which this entry relates I shall have passed or am except from an ASN specified medical examination within the specified period. (H10.1.6) **9.** I have read and fully understood the Procedure for Control of Drugs and Alcohol as contained in the MSA Yearbook Regulations H39, D35.1, G15.1.4 and have also fully familiarised myself with the information on the web sites referred to (www.ukad.org.uk and www.wada-ama.org) in particular the UK Anti-Doping Rules which have been adopted by the MSA (as amended). Further, if I am counter-signing as the Parent or Guardian of a minor then in addition to the deemed consent to the testing of that minor (Art 5.6.2) I hereby confirm that I give such consent for the minor concerned to be so tested. **Indemnity:** In consideration of the acceptance of this entry I agree that neither any one of or any combination of the MSA and its associated clubs, the organisers, the land owners or other occupiers, the promoters and their respective officers, servants, representatives and agents (the "Parties") shall have any liability for loss or damage which may be sustained or incurred by me as a result of participation in this event. Nothing in this clause is intended to or shall be deemed to exclude or limit liability for death or personal injury. To the fullest extent permitted by law I agree to indemnify and hold harmless each of the Parties in respect of any loss or damage whatsoever and howsoever arising from my participation in this event.

Driver 2 Signature: _____ Date: ___/___/___

Parent or guardian (if aged under 18):

Age (if under 18): _____ Name of parent/guardian: _____

Full address of p/g: _____

Signature of p/g: _____

Driver 3:

Driver name: _____
 Driver address: _____
 Postcode: _____ Date of Birth: ___/___/___ Hometown: _____
 Home phone: _____ Work phone: _____ Mobile phone: _____
 MSA Licence number: _____ MSA Licence grade: _____ BARC No/exp: _____
 Email address: _____ 2CV Racing club member no.: _____

Driver taking prescribed drugs / suffering any condition which the medical team should be notified of? _____

Person to be notified in case of serious accident: _____

Their phone no.: _____ Their address: _____

NOTE: If this driver is not a member of the Classic 2CV Racing Club then add an extra £ 60 to the final payment and the person above will be registered as an 'event member' for the 24hr race. Or the driver can join online at <https://www.2cvracing.org.uk/join-online-event/>

Driver 3 declaration:

I declare that: **1.** I have been given an opportunity to read the General Regulations of the Motor Sports Association and, if any, the Supplementary Regulations for this event and agree to be bound by them. I declare that I am physically and mentally fit and competent to take part in the event. I understand that motorsport is dangerous and accidents causing death, injury, disability and property damage can and do happen. I understand that these risks may give rise to my suffering personal injury or other loss and I acknowledge and accept these risks. **2.** To the best of my belief the driver(s) possess (es) the standard of competence necessary for an event of the type to which this entry relates and that the vehicle entered is suitable and roadworthy for the event having regard to the course and the speeds which will be reached. **3.** The use of the vehicle hereby entered is covered by insurance as required by the law which is valid for such part of this event as shall take place on roads as defined by the law. **4.** 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 prejudicially my normal control of the vehicle, I may not take part unless I have declared such disability to the ASN which has, following such declaration, issued a licence which permits me to do so. **5.** Any application form for a Licence which was signed by a person under the age of 18 years was countersigned by that person's parent/legal guardian/guarantor, whose full names and addresses have been given. **6.** If I am the Parent/Guardian/Guarantor of the driver I understand that I shall have the right to be present during any procedure being carried out under the Supplementary Regulations issued for this event and the General Regulations of the MSA. As the Parent/Guardian/Guarantor I confirm that I have acquainted myself with the MSA General Regulations, agree to pay any appropriate charges and fees pursuant to those Regulations (to include any appendices thereto) and hereby agree to be bound by those Regulations and submit myself without reserve to the consequences resulting from those Regulations (and any subsequent alteration thereof). Further, I agree to pay as liquidated damages any fines imposed upon me up to the maxima set out in Part 3, Appendix 1. **Note: Where the Parent/Guardian/Guarantor is not present there must be a representative who must produce a written and signed authorisation to so act from the Parent/Guardian/Guarantor as appropriate.** **7.** I hereby agree to abide by the MSA Child Protection Policy and Guidelines and the National Sporting Code of Conduct. **8.** I undertake that at the time of the event to which this entry relates I shall have passed or am except from an ASN specified medical examination within the specified period. (H10.1.6) **9.** I have read and fully understood the Procedure for Control of Drugs and Alcohol as contained in the MSA Yearbook Regulations H39, D35.1, G15.1.4 and have also fully familiarised myself with the information on the web sites referred to (www.ukad.org.uk and www.wada-ama.org) in particular the UK Anti-Doping Rules which have been adopted by the MSA (as amended). Further, if I am counter-signing as the Parent or Guardian of a minor then in addition to the deemed consent to the testing of that minor (Art 5.6.2) I hereby confirm that I give such consent for the minor concerned to be so tested. **Indemnity:** In consideration of the acceptance of this entry I agree that neither any one of or any combination of the MSA and its associated clubs, the organisers, the land owners or other occupiers, the promoters and their respective officers, servants, representatives and agents (the "Parties") shall have any liability for loss or damage which may be sustained or incurred by me as a result of participation in this event. Nothing in this clause is intended to or shall be deemed to exclude or limit liability for death or personal injury. To the fullest extent permitted by law I agree to indemnify and hold harmless each of the Parties in respect of any loss or damage whatsoever and howsoever arising from my participation in this event.

Driver 3 Signature: _____ Date: ___/___/___

Parent or guardian (if aged under 18):

Age (if under 18): _____ Name of parent/guardian: _____

Full address of p/g: _____

Signature of p/g: _____

Driver 4:

Driver name: _____
 Driver address: _____
 Postcode: _____ Date of Birth: ___/___/___ Hometown: _____
 Home phone: _____ Work phone: _____ Mobile phone: _____
 MSA Licence number: _____ MSA Licence grade: _____ BARC No/exp: _____
 Email address: _____ 2CV Racing club member no.: _____

Driver taking prescribed drugs / suffering any condition which the medical team should be notified of? _____

Person to be notified in case of serious accident: _____

Their phone no.: _____ Their address: _____

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<https://www.2cvracing.org.uk/join-online-event/>

Driver 4 declaration:

I declare that: **1.** I have been given an opportunity to read the General Regulations of the Motor Sports Association and, if any, the Supplementary Regulations for this event and agree to be bound by them. I declare that I am physically and mentally fit and competent to take part in the event. I understand that motorsport is dangerous and accidents causing death, injury, disability and property damage can and do happen. I understand that these risks may give rise to my suffering personal injury or other loss and I acknowledge and accept these risks. **2.** To the best of my belief the driver(s) possess (es) the standard of competence necessary for an event of the type to which this entry relates and that the vehicle entered is suitable and roadworthy for the event having regard to the course and the speeds which will be reached. **3.** The use of the vehicle hereby entered is covered by insurance as required by the law which is valid for such part of this event as shall take place on roads as defined by the law. **4.** 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 prejudicially my normal control of the vehicle, I may not take part unless I have declared such disability to the ASN which has, following such declaration, issued a licence which permits me to do so. **5.** Any application form for a Licence which was signed by a person under the age of 18 years was countersigned by that person's parent/legal guardian/guarantor, whose full names and addresses have been given. **6.** If I am the Parent/Guardian/Guarantor of the driver I understand that I shall have the right to be present during any procedure being carried out under the Supplementary Regulations issued for this event and the General Regulations of the MSA. As the Parent/Guardian/Guarantor I confirm that I have acquainted myself with the MSA General Regulations, agree to pay any appropriate charges and fees pursuant to those Regulations (to include any appendices thereto) and hereby agree to be bound by those Regulations and submit myself without reserve to the consequences resulting from those Regulations (and any subsequent alteration thereof). Further, I agree to pay as liquidated damages any fines imposed upon me up to the maxima set out in Part 3, Appendix 1. **Note: Where the Parent/Guardian/Guarantor is not present there must be a representative who must produce a written and signed authorisation to so act from the Parent/Guardian/Guarantor as appropriate.** **7.** I hereby agree to abide by the MSA Child Protection Policy and Guidelines and the National Sporting Code of Conduct. **8.** I undertake that at the time of the event to which this entry relates I shall have passed or am except from an ASN specified medical examination within the specified period. (H10.1.6) **9.** I have read and fully understood the Procedure for Control of Drugs and Alcohol as contained in the MSA Yearbook Regulations H39, D35.1, G15.1.4 and have also fully familiarised myself with the information on the web sites referred to (www.ukad.org.uk and www.wada-ama.org) in particular the UK Anti-Doping Rules which have been adopted by the MSA (as amended). Further, if I am counter-signing as the Parent or Guardian of a minor then in addition to the deemed consent to the testing of that minor (Art 5.6.2) I hereby confirm that I give such consent for the minor concerned to be so tested. **Indemnity:** In consideration of the acceptance of this entry I agree that neither any one of or any combination of the MSA and its associated clubs, the organisers, the land owners or other occupiers, the promoters and their respective officers, servants, representatives and agents (the "Parties") shall have any liability for loss or damage which may be sustained or incurred by me as a result of participation in this event. Nothing in this clause is intended to or shall be deemed to exclude or limit liability for death or personal injury. To the fullest extent permitted by law I agree to indemnify and hold harmless each of the Parties in respect of any loss or damage whatsoever and howsoever arising from my participation in this event.

Driver 4 Signature: _____ Date: ___/___/___

Parent or guardian (if aged under 18):

Age (if under 18): _____ Name of parent/guardian: _____

Full address of p/g: _____

Signature of p/g: _____

Section 3 – vehicle details:

Car number: _____ Make + model: _____
Class: _____ Transponder number: _____ Manager of team: _____
Team/entrant/sponsor name: _____

Section 4 – payment:

Please note - each driver **MUST** be a member of the Classic 2CV Racing Club. For each driver, add **£60** to your payment amount. Or, they can join online at <https://www.2cvracing.org.uk/join-online-event/>

Additional memberships @ £60 each?: _____ Total amount: _____

Any notes? (how are you paying?): _____

BACS payments to: The Classic 2cv Racing Club Ltd. – sort code: 23-05-80 account number (Metro bank) 22263174

Please use your Name/Team as reference. Unreferenced payments may not be credited to you

We are no longer accepting cheques.

Please save this document, edit the saved version, complete and save again, then email as an attachment to:

entries@2cvracing.org.uk

Alternatively, print off and return completed entry form to:

Chris Yates, 196 Wharton Road, Winsford, Cheshire. CW7 3AP