



Oulton Park – 13th May 2017 ENTRY FORM

Last date for 'Prompt Entry' point – Friday 28th April

Car Details

Make: PORSCHE	Model:
Colour:	Year:
Cc:	Transponder No:
Championship Race Number:	

Driver Details

All Drivers MUST be registered to race in the Porsche Club Championship and be a Member of the Porsche Club GB.

Name:		Competition Licence No:	
Address:		Licence Grade:	
		ASN Issuing Licence:	
		Under 18?: YES/NO – see page 2	
		Has driver competed at circuit before?: YES/NO	
Postcode:	Email:		
Mobile:	Daytime No:	Home No:	
Porsche Club Membership No.			

or *Entrant* Details where relevant (Please delete as appropriate)

Name:		Entrant Licence No:	
Address:		Competition Licence No:	
		Licence Grade:	
		ASN Issuing Licence:	
Postcode:	Email:		
Mobile:	Daytime No:	Home No:	

Passes should be sent to:- DRIVER / CO-DRIVER / ENTRANT (please delete as appropriate)

The General Declaration and Payment Details sections MUST be completed by all *Competitors* PRIOR to submission.

GENERAL DECLARATION TO BE COMPLETED BY ALL DRIVERS (AND ENTRANTS)

- 1 I have read the General Regulations of the Motor Sports Association and the Supplementary Regulations for 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 that risk. Further I understand that all persons who have any connection with the promotion and/or organisation and/or conduct of the event are insured against loss or injury caused through negligence.
- 2 I declare that 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 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 my 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.
- 4 I undertake that at the time of the event to which this entry relates I shall have passed or am exempt from an ASN specified medical examination within the specified period.

This entry form is not valid unless fully signed below by all relevant parties

Driver Signature:.....Date:.....

Co-Driver Signature:.....Date:.....

Entrant Signature:.....Date:.....

