



# West of Scotland Kart Club – Race Entry Form 2018

Entry Fee Enclosed (tick ✓)

 Members £50 Non-Members £60 Novice Members £25 Novice Non-Members £30

|  |   |                                    |                           |          |
|--|---|------------------------------------|---------------------------|----------|
| Entry form for race meeting held on  |   | (Date)                             | 2018                      |          |
| <u>Name</u>  | <p>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.</p> <p>I declare that I have been given the 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 to take part in the event and I am competent to do so. I acknowledge that I understand 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 having any connection with the promotion and/or organisation and/or conduct of the event are insured against loss or injury caused through their negligence.</p> <p>I declare to the best of my belief the driver possesses 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. 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.</p> <p>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 H10.1.1</p> <p>I am in possession of a charged fire extinguisher, minimum standard BSEN3 with a 55B size rating.</p> |                                    |                           |          |
| <u>Address</u>   |   |                                    |                           |          |
|  |   |                                    |                           |          |
|  |   |                                    |                           |          |
| <u>Post Code</u>   |   |                                    |                           |          |
| <u>Telephone No</u>  |   |                                    |                           |          |
| <u>Mobile No</u>   |   |                                    |                           |          |
| <u>Email Address</u>   |   |                                    |                           |          |
| <u>Novice</u>  |   |                                    |                           | YES / NO |
| <u>Club</u>  |   |                                    |                           |          |
| <u>Class Entered</u>   |   |                                    |                           |          |
| <u>Race No</u>   |   |                                    |                           |          |
| <u>Engine</u>  |   |                                    |                           |          |
| <u>Chassis</u>   |   |                                    |                           |          |
| <u>Licence No</u>  |   |                                    |                           |          |
| <u>Transponder No.</u>   |   |                                    |                           |          |
| <u>My age is</u>   |   | if applicable state Over 18 years. | <u>Driver's signature</u> |          |
| Countersigned As Parent/ Guardian/Guarantor of the driver:   |   |                                    | <u>PG Licence No</u>      |          |
| <u>Name</u>  | <p>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 Motor Sports Association.</p> <p>I confirm that I have acquainted myself with the General Regulations of The Motor Sports Association, 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</p> <p>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.</p>   |                                    |                           |          |
| <u>Address</u>   |   |                                    |                           |          |
|  |   |                                    |                           |          |
|  |   |                                    |                           |          |
|  |   |                                    |                           |          |
|  |   |                                    |                           |          |
|  |   | <u>Signature</u>                   |                           |          |
| <p><b>Closing date for applications is last post Wednesday before the event</b></p> <p>Cheques or Postal Orders must be made payable to West of Scotland Kart Club and accompany the completed entry form sent to:<br/>Mr Jamie Davie, 4 McCann Court, Kilsyth, Glasgow, G65 0BE</p> <p>Alternatively you can email this form to <a href="mailto:compsec@wskc.co.uk">compsec@wskc.co.uk</a>, but payment <u>must</u> be made via credit or debit card with details below</p> <p>Entry may also be made on line at <a href="http://www.wskc.co.uk">www.wskc.co.uk</a> using the link on the right-hand side.</p> <p>Please note dishonoured payments may incur an additional cost</p> |   |                                    |                           |          |

### Debit/Credit Card Payments

I wish to pay by Debit/Credit Card. (Please note your card details will be destroyed once the transaction is completed)

Name on Card

Signature

Card No:

Start Date

Expiry Date

Security Code

Issue No.