

Super Lap Scotland 2016

Official Entry Form



	<u>Entry Fee's</u>	
	<u>1st Driver</u>	<u>2nd Drivers</u>
One Day	£185	£160
Two Days	£285	£240
Full Season	£800	-----

	<u>Event Dates</u>	<u>Tick To Enter</u>
1	Sun. 17 th April 2016 - Clockwise	
2	Sat. 21 st May 2016 – Reverse	
3	Sun. 22 nd May 2016 - Clockwise	
4	Sat. 30 th July 2016 – Reverse	
5	Sun. 31 st July 2016 - Clockwise	
6	Sun. 18 th Sep 2016 – Reverse	

Official Use Only

PERSONAL DETAILS

Drivers Name: _____

Race Licence No: _____ Licence Grade: _____

Drivers Address: _____

Post Code: _____

Email Address: _____

Drivers Home Town / Country: _____

Daytime Tel No: _____

Evening Tel No: _____

Mobile Tel No: _____

Does the driver have any disability or is the driver taking any prescribed drugs which should be notified to the Circuit medical staff: Yes / No (if yes please give details). _____

Entrant / Sponsor / Team: _____

Entrants Licence No. (if applicable): _____

Entrants Address: _____

Post Code: _____

Entrants Tel No: _____

Address for Paperwork / Tickets: _____

Post Code: _____

VEHICLE DETAILS

Make: _____ Model / Type: _____

Preferred Competition Number: _____ Class entered: _____

CC: _____ Year: _____

Declared Power to Weight ratio: _____ Turbo: Yes / No

Timing Module (Transponder) Number: _____

Vehicle Category: (please circle)
Road Going Series Production Modified Series Production
Road Going Series Specialist Modified Series Specialist Sports Libre

PAYMENT DETAILS

No entry will be accepted unless accompanied by the correct entry fee.

All cheques are to be made payable to the **Knockhill Motor Sports Club**

1: I enclose a cheque for the total of £.....

2: Please debit my Credit / Debit Card for the total of £.....

Please tick to indicate the type of card.

Card Number:

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Start Date	<input type="checkbox"/>	<input type="checkbox"/>	/	<input type="checkbox"/>	<input type="checkbox"/>	Expiry Date	<input type="checkbox"/>	<input type="checkbox"/>	/	<input type="checkbox"/>	<input type="checkbox"/>	Issue No	<input type="checkbox"/>	Maestro only	<input type="checkbox"/>	3 Digit Security Code	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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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 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.
- 2) I understand that motorsport can be 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. 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 track 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 the Event including but not limited to damage to property, economic loss, consequential loss or financial loss howsoever caused. 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.
- 3) 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.
- 4) 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.
- 5) Any application which was signed by a person who has not reached his 18th birthday shall be countersigned by that person's parent or guardian, whose full names and addresses shall be given. An entry may be made by facsimile or other electronic means of communication and must be made by the parent or guardian, whose full names and addresses must be given (H.32).
- 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. 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 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.
- 8) 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. (H10.1.6)
- 9) I have read and fully understood the Procedure for Control of Drugs and Alcohol as contained in the Competitors' and Officials' 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. 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 (UKAD Code Art 5.6.2) I hereby confirm that I give such consent for the minor concerned to be so tested.
- 10) I hereby agree to abide by the MSA Child Protection Policy and Guidelines and the National Sporting Code of Conduct.

Drivers Signature:		If completing this form electronically please place a cross in this box to confirm you have read & understood the declaration:		Date:
Entrants Signature:		If completing this form electronically please place a cross in this box to confirm you have read & understood the declaration:		Date:

IMPORTANT: Any indemnity and/or declaration as prescribed by the paragraphs above is signed by a person under the age of 18 shall be countersigned by that person's parents or guardian, whose full name & address shall be given below.

Parent / Guardians Signature: _____ Date: _____

Address: _____

Contact Tel No: _____

NEXT OF KIN

Please complete name, address and telephone number of relative or friend who can be contacted in the event of a serious accident.

Name: _____

Address: _____

Contact Tel No: _____

OFFICE USE ONLY

Date Received	Date Acknowledged	Entry Fee	Method

Completed Entry Forms should be returned to:
Knockhill Motor Sports Club, Knockhill Racing Circuit, Nr. Dunfermline, Fife, KY12 9TF.
 Tel. 01383 723337 Fax. 01383 620167 E-mail. rory@superlapscotland.co.uk