

2017 Official Deutschefest Entry Form

CAR DETAILS	
Make	Model
Colour	Year
CC	Transponder Number
Preferred Race Number	Registration Number

DRIVER DETAILS		
<i>All drivers MUST be registered to race in the BMW Championship (No fees apply for this). Registration forms can be downloaded from the website www.bmwrdc.com</i>		
Name	Competition Licence No	
Address	Licence Grade	
	ASN Issuing Licence	
	Under 18	Yes/No – See page 2
Postcode	Email	
Mobile	Daytime No	Home No

CO-DRIVER DETAILS		
<i>Or Entrant details where relevant (Please delete as appropriate)</i>		
Name	Competition Licence No	
Address	Licence Grade	
	ASN Issuing Licence	
	Under 18	Yes/No – See page 2
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)

- I have read 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.
- 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.
- 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.
- 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. AIBMWI entries must be submitted 10 working days before the first requested race date. Any entries received after that date will be subject to a £30 penalty charge

Entrant Signature:	Date:
Driver signature:	Date:
Co-Driver Signature:	Date:

Any indemnity and/or declaration prescribed above which is signed by a person who has not reached his/her 18th birthday must be countersigned by that person's parent or guardian:

I am the Parent/Guardian 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 Section Z. I hereby agree to abide by the MSA Child Protection Policy and Guidelines

Parent/Guardian Full name:	Relationship to driver
Address:	
Postcode:	Telephone:
Signature:	Date:

Person(s) to be informed in case of a serious accident: (this entry form is not valid unless this section is completed)

Name	Relationship	Telephone
Driver:		
Co-Driver		

BH Indy	Brands Hatch – (20 minutes qualifying, 20 minutes race and 20 minutes race)	£400	
<i>Bank Transfer or Cheque made payable to BMW Racing Drivers Club</i>			
TOTAL DUE		£	

PAYMENT DETAILS:

- Cheque:** Please send a cheque made payable to **BMW Racing Drivers Club** for the amount due to the address shown below. Please write the driver(s) name on the back of the cheque.
- Direct Transfer:** (Please ensure that your name is included as the payment reference.)
Bank: Lloyds Account Number: 01869705 Sort Code: 30-99-09

Please return your completed registration form(s) to:

BMW Racing Drivers Club
27 Cranbrook Drive
Esher
Surrey
KT10 8DW

Telephone: 07710 493953 (Ask for Trevor Ford)

Email: trevor-bmwrdc@hotmail.co.uk