CARMARTHEN MOTOR CLUB LTD. WEST WALES RALLY SPARES CHRISTMAS STAGES 2004

Indemnification Declaration

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 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 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.

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.

Signed:			
Entrant	Date	State your	age if under 18
Driver	Date	State your	age if under 18
Co-driver	Date	State your	age if under 18
	l by that perso		under the age of 18 years rdian whose full name and
Signed	Date	Signed	Date
(Parent/Guardian of Dr driver)			(Parent/Guardian of Co-
Full name		_ Full name	
Address		Address	

Tel nr	Tel nr

Ref. Nr.	Date received	Acceptance/ refusal sent	Payment details	Comp. Number			
	r/sponsor		Licence N	r			
Address ₋							
DRIVER			Surname				
Address _.							
			Post Code				
Telephone Nr(s) Comp L			Comp Licence	e Nr			
Motor Club E-mail address (if any)							
NEXT OF Name	KIN:		Relationship				
Address ₋			Tel Nr:				
CO-DRIVI First Nam	ER ne		Surname				
Address ₋							
			Post Code				
Telephone Nr(s)			Comp Licence Nr				
Motor Club			E-mail address (if any)				
NEXT OF Name	KIN:		Relationship				
Address ₋			Tel Nr:				
	AND CLASS Model:						
Engine Ca	apacity:		Colour:				
Forced In	duction: YES/	NO	Number of valves per cylinder:				
	 Prive: YES/NO		Number of camshafts (per bank):				

Vehicle reg nr:	Class entered (See SR8):

ADDITIONAL INFORMATION

Championship Contender/Additional awards		Driver	Co-driver
Rallysport Challenge 2005	YES/NO R	eg Nr	YES/NO Reg Nr
Ladies/mixed crew		YES/N	0
	FEES		
Entry fee			170.00
C.M.C. Membership - Driver to 31st Do		5.00	
C.M.C. Membership - Co-driver to 31s 2005		5.00	
(Please tick which paid for)			
		TOTA	 L £

Please enclose cheque(s)/postal order(s) totalling the above amount, made payable to CARMARTHEN MOTOR CLUB LTD. Post dated cheques will not be accepted.

SEEDING INFORMATION (Last 3 years only)

Please enter below details of driver's best performance in Stage Rallies (As a first named driver). If no appropriate results, please include any relevant experience.

EVENT	STATUS &	YEAR	STAR T	POSITION	
	CHAMPIONSHIP		NR.	OVERALL	CLASS

N.B. Any entrant falsely declaring or withholding information may forfeit their entry fee and have their entry refused.

THE ENTRY FOR MUST BE COMPLETED IN EVERY RESPECT - INCLUDING SIGNING THE INDEMNIFICATIONS and sent to the Entries Secretary:

Ryland James, Cartref, Bethlehem Road, Pwll Trap,

St Clears, Carmarthen, SA33 4AN.

Tel & Fax: 01994 230966 (1900 - 2100 hours only please) E-mail: Rylandjms@aol.com

Please enclose 3 completed labels to be used on correspondence.