

The Rainworth Skoda Golden Jubilee Dukeries Rally
Saturday 13th June 2009

Organised by Dukeries Motor Club Ltd

Ref No		Start No	
Rec'd		Ack'd	

Entrant / Sponsor (for Entry list)

Name:		Licence No: (if applicable):	
Address:			
Postcode:		Tel No:	

Driver		Co - Driver	
Name:		Name:	
Address:			
Postcode:		Postcode:	
E-Mail:		E-Mail:	
Home Tel No:		Home Tel No:	
Mobile No:		Mobile No:	
Motor Club		Motor Club	
Comp Licence No:		Comp Licence No:	

Correspondence To (Insert 'Y')	Driver		Co-Driver	
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(If blank then correspondence will be sent to Co-driver)

Acknowledgement via:	E-mail		Post		Please insert 'Y' in one box
Results via:	E-mail		Post		Please insert 'Y' in one box

Championship Eligibility	Driver	Co-Driver
BTRDA Gold Star Championship		
BTRDA Silver Star Championship		
Millers Oils BTRDA 1400 Championship		
BTRDA Rally First Challenge		
MG ZR Challenge		
MSA English Rally Championship		
Fostek Engineering ANCC		
Competition Car Insurance EMAMC		
Roadrunner/Phoenix Awards ANEMMC		
Ward Construction/M-Tech Dev. AEMC		
Dukeries MC member		

Please insert 'Y' in box (s) - if blank we assume NO

Car Details

Make / Model:		Forced Induction:		Please insert 'Y' in box	
Cubic Capacity(cc):		Four Wheel Drive:		Please insert 'Y' in box	
Colour (s):		Registration no:			
Class (See SR 6)		Historic Classes	Date of registrat'n:	Scrutineering	Please insert 'Y' in box
				Saturday	Friday

Limited Saturday scrutineering by appointment ONLY

Seeding Information (Last 3 years Driver only)

Year	Event	Grade	Overall Position	Class Position

Insurance (See SR 20)

I will be using the Lockton Scheme		Please insert 'Y' in box - if blank we assume NO
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If you have your own insurance cover for the event
Please supply the following information. (This is an MSA requirement)
Name of Insurance provider:
Address:

FEES

RF1.0 & RF1.4 and 1st Time Forest Driver	£325	
All other Classes	£375	
WR 1 Class	£420	
Auxiliary Pack (must be ordered with entry)	£20	
Additional Service Pack	£10	
Standard Locktons Insurance Premium	£26	
Dukeries MC Membership (till Dec 31 2009)	£12 each	
Total £		£0

Please insert amounts in boxes

Completed form and payment to:

Mrs Joanne Smith
ENTRIES SECRETARY
12 Breckbank
Forest Town
Mansfield, NOTTS
NG19 0PZ

Please insert total amount here if not electronic entry - **Total £**

Cheques Payable to : Dukeries Motor Club Ltd

The Rainworth Skoda Golden Jubilee Dukeries Rally 2009 - Entry Form - Indemnification

I declare that I have been given the opportunity to 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 the 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 declare that the use of the vehicle hereby entered will be covered by insurance as required by the law, which is valid for such part of the event as shall take place on roads as defined by the law.

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.

Date: _____

Sign Entrant: _____

Sign Driver: _____

Sign Co-Driver: _____

Age (if under 18 years): _____

Age (if under 18 years): _____

IF SENDING THIS FORM BY EMAIL SIGNED PAPER COPY MUST BE SENT WITH PAYMENT

Persons to be informed in case of accident

Driver

Co-Driver

Name: _____	Name: _____
Address: _____	Address: _____
Tel: _____	Tel: _____
Mobile: _____	Mobile: _____

Any indemnity and/or declaration which is signed by a person under the age of 18 years shall be countersigned by that person's parent or guardian whose full name and address shall be given. (below)

THIS ENTRY IS MADE WITH MY CONSENT

Signed _____

Date _____

Parent / Guardian of the Driver / Co-Driver (delete as applicable)

Full Name	_____
Address	_____
Tel No:	_____

Press Information
