



Race Secretary
 Mike Naylor
 19 Ley Hill Road
 Sutton Coldfield
 B75 6TF
 Tel: 07801 966941

Make Cheques Payable to Xrated Karting

Date of Meeting:

Name: Circuit :

Class: **Aixro 180**

Address: Race Number:

.....

..... Post Code: Telephone No:

Email: Mobile No:

| | | | | | | | | | |
|-----------------|-----|--|--|--|--|--|--|--|--|
| Transponder No: | TXP | | | | | | | | |
|-----------------|-----|--|--|--|--|--|--|--|--|

Entrant: Entrant Licence Number:

Chassis: Engine:

Name of Person to Contact in case of emergency:

Address:

..... Tel:

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 person having any connection with the promotion and/or organization and/or conduct of the event are insured against loss or injury caused through their negligence.

I declare that 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 take part at my own risk.

Drivers Signature:

Date: