



BOURNEMOUTH & DISTRICT CAR CLUB

THE MARCH HARE SLALOM

17th March 2019



Please print clearly and use block capitals

CAR DETAILS	
Make:	Model:
Cc:	Registration Number:
Colour:	Class:
Double Driven? YES/NO	Name second driver:

DRIVERS DETAILS	
Name:	
Address:	
Post Code	Email Address:
Tel No:	
Club:	Novice/Expert/U25/Lady
Emergency Contact:	
Emergency Contact Telephone Number:	

TOW CAR & PASSENGER DETAILS	
Tow Car Make/Reg:	
Passenger Names & Addresses:	

PAYMENT DETAILS	
Entry Fee:	£25.00 (£30.00 after 11 th March 2019)
Entry Fee: U23	£10.00
B&DCC Membership	£15.50 (if required)
Total:	£
Please make cheques payable to Bournemouth & District Car Club	

CARD DETAILS		
Card Type: Visa Debit/Mastercard/Visa (please delete as appropriate)		
Card Number:	Exp Date:	CCV:
Name on Card:		
Statement address:		



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Declaration of Indemnity:

I declare that I have been given the opportunity to read the General Regulations of Motorsports UK 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 competition and the potential risk with motor sport and agree to accept this 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 the vehicle, I may not take part unless I have declared such disability to the ASN who has, following such declaration, issued a licence which permits me to do so.

I also declare that the information given on this entry form is a true record and I enclose the appropriate entry fee in accordance with the Supplementary Regulations.

Signed.....Date.....

If the driver is under the age of 18 years, then this form **MUST** be counter-signed by a Parent or Guardian.

Signature of
Parent/Guardian.....Date.....

When complete please send the form and correct entry fee to:

Sylvia Candy
74 Howe Lane
Verwood
Dorset
BH31 6JF
Tel: 01202 813590
Email: scan1890@gmail.com