

All entries to: DKC Competition Secretary  
Tracey Davies  
Glan y Gors Park  
Cerrigydrudion  
North Wales  
LL21 ORU  
Tel: 01490 420770 Fax: 01490 420702

<b>DATE OF MEETING</b>	<b>CLASS</b>			
<b>NAME</b>	<b>OWN TRANSPONDER NO (enclose £7.00 for hire)</b> <b>YES Transponder No:</b>			
<b>ADDRESS</b>	<b>CHASSIS</b>			
	<b>ENGINE</b>			
	<b>RACING NO.</b>			
	<b>LICENCE NO.</b>			
<b>EMAIL ADDRESS</b>	<b>GRADE please tick</b>	NAT B	NAT A	INT
<b>TEL HOME:</b>	<b>NAME OF CLUB</b>			
<b>TEL WORK:</b>				

**ARE YOU A NOVICE?**

I have read the Supplementary Regulations issued for this event and agree to be bound by them and the General Regulations of the Motor Sport Association Ltd in consideration of the acceptance of this entry and of my being permitted to take part in this event, in respect of any parts of the event not held on a publicity adopted road, I agree to save harmless and keep indemnified The Motor Sport Association Ltd, such person, persons or body as may be authorised by the Motor Sports Association Ltd to promote or organise this event and their respective Officials, Servants, Representative and Agents together with other competitors and their respective Servants, Representative and Agents, from and against all actions, claims, costs, expenses and demands in respect of Death or injury to or damage to the property of myself, my Driver(s), Passenger(s), Passenger(s), Mechanic(s) or associated personnel, arising out of or in connection with this entry or my taking part in this event.

<b>AGE IF UNDER 18</b>	_____ years	<b>OVER 18 please tick</b>	_____
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I declare that to the best of my belief, the driver(s), possess(es) the standard 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 at the time of the event to which this entry relates I shall have passed and ASN specified medical examination within the specified period.

<b>DRIVERS SIGNATURE</b>	<b>COUNTER SIGNATURE (if driver is under 18)</b>
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<b>NEXT OF KIN NAME AND ADDRESS</b>	I am the Parent/Legal Guardian/Guarantor (delete as appropriate) of the above and understand that I or my Guarantor 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.  When a Guarantor's representative attends an event with a minor and signs on as his entrant, the representative must produce the Guarantor's written and signed authorisation to so act.
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<b>ENTRANT</b>	<b>ENTRANT LICENCE NO.</b>
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**CLOSING DATE FOR ENTRIES IS MONDAY PRIOR TO RACE DAY.**  
**Entry fee is £40 members, £50 non-members. Transponder Hire Fee £7**  
**LATE ENTRIES WILL BE ACCEPTED SUBJECT TO £10.00 SUR-CHARGE**  
**ALL CHEQUES TO BE MADE PAYABLE TO DRAGON KART CLUB LTD**  
**ALL MAJOR CREDIT CARDS ACCEPTED (except American Express)**  
**WEBSITE = [www.dragonkartclub.com](http://www.dragonkartclub.com)**  
**EMAIL = [info@dragonkartclub.com](mailto:info@dragonkartclub.com)**