

Sporting Trials Car Club Ltd
Trial Name: Tweed's -4
Championship Round of STCC and BTRDA
Saturday 09 March, 2024
Ballycoose Rd, Cairncastle
BT40 2RW

ENTRY FORM

Entrant/Driver
Name: _____
Address: _____
Post code: _____
Telephone: _____
Age, if under 18 years* _____ see below

Passenger
Name: _____
Address: _____
Postcode: _____
Telephone: _____
Age, if under 18 years* _____ see below

Trials Car Details
Make: _____
Engine Capacity: _____

Double Driving
Yes / No _____
If yes, with whom _____

Please send your completed entry form by email to the secretary of the meeting to arrive not later than Friday 08 March.
The entry fee is £30.00 per trail. Payment must be by BACS to the club account by Friday 09 March. Please identify yourself in the beneficiary reference box.
Bank: Danske, Donegall Square West
Account name: Sporting Trials Car Club
Sort code: 950332; Account no.: 91048244

Secretary of the meeting: Peter Frost; Telephone: 07811413739; e-mail: sportingtrialsclubni@gmail.com
Trials start at 10.30am
Clerk of the Course: D Webster
Permit no. 134998

I declare that I have been given the opportunity to read the General Regulations of the Motorsport 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 the competition and the potential risk inherent with motor sport and agree to accept that risk.

I understand that motorsport can be dangerous and accidents causing death, injury, disability and property damage can and do happen.

I understand that these risks may give rise to my suffering personal injury or other loss and I acknowledge and accept these risks.

In consideration of the acceptance of this entry I agree that neither any one of or any combination of Motorsport UK and its associated clubs, the organisers, the track owners or other occupiers, the promoters and their respective officers, servants, representatives and agents (the "Parties") shall have any liability for loss or damage which may be sustained or incurred by me as a result of participation in the Event including but not limited to damage to property, economic loss, consequential loss or financial loss howsoever caused. Nothing in this clause is intended to or shall be deemed to exclude or limit liability for death or personal injury. To the fullest extent permitted by law I agree to indemnify and hold harmless each of the Parties in respect of any loss or damage whatsoever and howsoever arising from my participation in this event.

I declare that to the best of my belief the driver(s) possess(es) 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 have read and fully understood the regulations for Control of Drugs and Alcohol as contained in the Competitors' and Officials' Yearbook Regulations C1.1.7, D35.1, G15.1.4, H38 and have also fully familiarised myself with the information on the web sites referred to (www.motorsportuk.org, www.ukad.org.uk and www.wada-ama.org) in particular the UK Anti Doping Rules which have been adopted by Motorsport UK.

I hereby agree to abide by the Motorsport UK Safeguarding Policy and Guidelines and the National Sporting Code of Conduct.

I declare that my car is fitted with a free and uninterrupted differential and that no limited slip device is fitted.

If the driver is under eighteen years of age, a parent, guardian or guarantor must confirm that they are acquainted with Motorsport UK General Reg D 13.1.1

Driver's Signature _____	Passenger's signature _____
Date _____	Date _____

Person to be informed in the event of an accident:

Driver	Passenger
Telephone No	Telephone No

*A parent or guardian must sign this consent form for Drivers and passengers under 18 years of age

Driver This entry is made with my consent Signature	Passenger This entry is made with my consent Signature
Relationship Address	Relationship Address
Date.	Date

Directions to Site:

Ballycoose, 31 Ballycoose Road, Ballygally, Larne, Co. Antrim, BT40 2RW

Google maps reference for trial site gate to farm: