

MEDIA TEST DAY ENTRY FORM - WEDNESDAY 27TH APRIL 2016

- A SPECIAL TEST AND MEDIA DAY TO PROMOTE THE 2016 SILVERSTONE CLASSIC
- OPEN ONLY TO COMPETITORS/RACE CARS REGISTERED FOR THE 2016 EVENT
- TESTING ON THE FULL GRAND PRIX CIRCUIT 9.00 TO 11.30 AND 14.30 TO 17.00 IN CLASSES
* SUBJECT TO CHANGE
- MEDIA PASSENGER RIDES 11.30 TO 13.30
- FOR 2 DRIVER RACES WHERE BOTH DRIVERS WILL BE TESTING PLEASE ENSURE THAT A SECOND FORM IS COMPLETED AND RETURNED.

RACE ENTERED:			
DRIVER DETAILS. Surname:		First Name:	
Address:			
Town:		Postcode:	
Country:			
Telephone:	Mobile:	Fax:	
Email:			
Race Licence No:		Grade:	
2ND DRIVER DETAILS (if applicable). Surname:		First Name:	
CAR DETAILS. Make:		Model:	
Year:	Colour:	CC:	

GENERAL DECLARATION TO BE COMPLETED BY ALL DRIVERS (AND ENTRANTS)

- 1 I have 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 that risk. Further I understand that all persons that have any connection with the promotion and/or organisation and/or conduct of the event are insured against loss or injury caused through negligence.
- 2 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.
- 3 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.
- 4 I undertake that at the time of the event to which this entry relates I shall have passed or am exempt from an ASN specified medical examination within the specified period.
- 5 I confirm at the time of the event I hold a current and valid competition licence.

SIGNATURES: This entry form is not valid unless the driver has signed below.

Driver:	Date:
Entrant:	Date:

Any indemnity and or declaration prescribed above which is signed by a person who has not reached his or her 18th birthday must be countersigned by that person's parent or guardian:

Driver under 18?	Yes	No	Entrant under 18?	Yes	No
Parent/Guardian Full Name:			Relationship:		
Address:			Postcode:		
Telephone:		Signature:	Date:		

Please inform us if you kindly intend to offer passenger rides in the media session 11.30 - 13.30	Yes	No	Car must have a passenger seat and be safety compliant. Each passenger will have signed a liability disclaimer form.
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Please complete and return by Wednesday 20th April to:
Historic Sports Car Club Ltd., Silverstone Circuit, Silverstone, Nr.Towcester NN12 8TN.
Telephone: 01327 858400, Fax: 01327 858500, Email: office@hsc.org.uk
VAT Registration Number 413 3854 67

Signed: