prior to are orontin quotation and procented at			
Entrant's Name:			
Address:			
Entrants Licence Number:			
Licence Expiry D	Date: / /		
B 1 Vehicle Details			
Vehicle Make:	Vehicle Model:		
Colour:	Preferred Competition No:		
Capacity in cc: Log Book No: (all vehicles)	Certificate of Description: (Schedule K or T&C where applicable)		
B 2FOR HISTORIC OR CLASSIC VEHICLES - PLEA	SE COMPLETE THE FOLLOWING		
1. Tick appropriate box below to confirm which Appendix	2. In the appropriate box below to confirm the applicable period		
Six Schedule the vehicle complies with	assification or group from the Schedule.		
Schedule K	Schedule K Period Classification		
Schedule T & C	Schedule T & C Group		
Schedule CR	Schedule CR period grouping		
	x Six Section Three vehicle Classification Part Two for assistance in		
completing this section of the entry form			
C: Complete if GST Registered:			
GST Registration No:			
Name of Person / Company / Team Registered:			
Form: Haw ea 20 August 2017 Entry Form COMC. Docx Date: 01/16			



MotorSport

Α

Driver's Name:

Email Address: Telephone – Home:

(Name of club)

Emergency

Contact:

Entrant:

MALE / FEMALE

Required for statistical purposes

Age Group (please circle appropriate):

Name:

Address:

## CENTRAL OTAGO MOTORSPORT CLUB PO Box 76. CROMWELL 9342

DATE: 20 AUGUST 2017 .....

Financial Member of the following MotorSport NZ Member Club:

Contact Telephone Number:

Telephone – Business:

Competition Licence No:

Civil Drivers Licence No:

Under 19

prior to the event in question and presented at documentation)

19-25

26-35

(to be completed in all cases if Entrant is other than the driver. Licence must be purchased from MotorSport NZ Inc

36-60

Relationship:

ORGANISER'S USE ONLY			
Group	Class		
Date Received	Allocated Comp. No		

0-1600cc Classes A В 1601-2000cc С 2001cc & abov e (inc. Turbo or S/c) 4WD (any 4WD)

...... / ..... / ......

...... / ...... / ......

..... / ..... / .....

..... / ..... / .....

Club Membership Exp Date:

Date of Birth:

## **CLUBSPORT ENTRY FORM**

**Driver / Entrant Details:** 

# Bank A/C 03 1355 0685023 00

CLASS ENTERED

Telephone - Mobile:

Licence Exp Date:

Licence Exp Date:

61 plus

### 1. Indemnity:

I have received the Supplementary Regulations and all other regulations or Articles as determined in the Appendices and Schedules of the current New Zealand Motorsport Manual for the event I am entering and agree to be bound by them and by the National Sporting Code of MotorSport New Zealand Inc.

In consideration of the acceptance of this entry and of my being permitted to take part in the Meeting or Events detailed, I agree not to pursue claims against and (severally) to hold harmless, indemnify and keep indemnified MotorSport New Zealand Inc, its members, associated or affiliated clubs and entities, ClubSport and/or event organisers and promoters, the inviting club and entity (or entities), race circuit ow ners, providers and operators, ow ners and tenants of private property (including land, buildings and/or fixtures, fittings and chattels) traversed, or proximate to events, officials, fellow competitors, and the directors, officers, servants, representatives and agents of those entities (all together "the Indemnified Parties") in relation to all losses, actions, expenses, costs, liabilities, claims and demands in respect of death, injury, loss or damage to persons or property of myself, and/or my team (including drivers, co-drivers, passengers, management and/or mechanics) w hatsoever, caused or arising out of or in connection with this entry or taking part in the events to which this entry relates, notw ithstanding that such death, injury, loss or damage may have been contributed to or caused by the negligence of any of the Indemnified Parties (in accordance with the Contracts (Privity) Act 1982).

### 2. Ability to Control a Vehicle Declaration by Driver:

I declare that should I at the time of any event this entry form relates to be suffering from any disability of any kind w hether permanent or temporary w hich is likely to detrimentally affect my control of my automobile or my fitness to drive, I w ill not participate.

#### 3. Vehicle Conformance with Schedule A/AA Declaration by Driver:

I declare the vehicle detailed on this entry form complies with the vehicle safety items set out below (as applicable) and will be presented on request to an appointed scrutineer or Technical Officer complying at all times with the safety and eligibility requirements detailed in the National Sporting Code and its Appendices and Schedules.

Critical Safety	Non-Critical Safety	Non Safety			
<ul> <li>Helmet</li> <li>Head &amp; Neck Restraint</li> <li>Protective Clothing</li> <li>Safety Harness</li> <li>Window Net(s)</li> <li>Roll Bar / Safety Cage</li> <li>Seat(s) and Mounts</li> <li>Fire Extinguisher</li> <li>Wheels and Tyres</li> <li>Brake System</li> <li>Steering &amp; Suspension Systems</li> <li>Fuel Tank(s) / Fillers / Lines</li> </ul>	<ul> <li>Engine &amp; Transmission Mounts</li> <li>Flexible Fluid Lines &amp; Hoses</li> <li>Throttle Return (Failsafe)</li> <li>Engine Starter Operation</li> <li>Reverse Gear Operation</li> <li>Exhaust System</li> <li>Oil Catch Tank(s)</li> <li>Electrical Wiring</li> <li>Ignition / Circuit Breaker</li> <li>Battery</li> <li>Lighting Systems</li> <li>Brake Lights</li> <li>Rear Lights / Rain Lights</li> <li>Bodyshell / Chassis Condition</li> <li>Exterior Appearance</li> <li>Panels / Covers</li> <li>Doors</li> <li>Window s</li> <li>Wipers &amp; Demisting</li> <li>Cockpit Construction / Fittings</li> <li>Bulkheads</li> <li>Tow Eyes</li> </ul>	<ul> <li>Ballast (Security)</li> <li>Competition Numbers</li> <li>Registration &amp; WOF Labels</li> <li>LVV / MSNZ Authority Card</li> <li>LVV Plate</li> <li>Optional Equipment</li> </ul>			
<ul> <li>I ack now ledge that where any breach of the Safety Schedule is found during a Safety Audit I will be subject to penalties under the National Sporting Code and my signature below indicates my acceptance of this undertaking.</li> <li>4. Consent:</li> <li>I consent to the details contained on this form being held by MotorSport New Zealand Inc and/or the Inviting Clubs for the purpose of the promotion and benefit of the Meeting or Events concerned, and MotorSport in general. I acknow ledge my right to access and correction of</li> </ul>					
this information. This consent is given in accordance with the Privacy Act 1993. I also authorise the medical providers of the event to disclose medical information relevant to illness or injury sustained during the above mentioned event to MotorSport NZ and it's officials.					
Signature of Driver:Date:					
Signature of Entrant:Date:					
<b>IMPORTANT NOTE</b> If any of the above signatories are under the age of <b>16</b> years then they must produce a Junior Competition licence or have the following completed by an authorised person:					
l,	of				

(full name)	(address)	
being the parent/ guardian of		
(full name of underage competitor)	o hereby consent to	nis/her participation in the event.
Signed:	. Date:	