



Lincoln Motor Cycle & Car Club
www.lincolnmotorsport.co.uk



The Bruce Robinson Rally

11/12th February 2012

kindly sponsored by

M.G. Raw Motor Group

I declare that I have been given the opportunity to read the General Regulations of The Motor Sports Association 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 motorsport and agree to accept that 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 declare that the use of the vehicle hereby entered will be covered by insurance as required by the law which is valid for such part of this event as shall take place on roads as defined by the law.

DRIVERS SIGNATURE.....

DRIVERS NAME.....

Age (if under 18).....

NAVIGATORS SIGNATURE.....

NAVIGATORS NAME.....

Age (if under 18).....

Any indemnity and/or declaration which is signed by a person under 18 years shall be counter signed by the persons parent or guardian whose full name and address shall be given.

Parent / Guardian of Driver.

NAME.....SIGNATURE.....

ADDRESS.....

Parent / Guardian of Navigator.

NAME.....SIGNATURE.....

ADDRESS.....

ENTRY FORM:- The Bruce Robinson Rally 11/12th February 2012

TO BE COMPLETED IN FULL AND SENT TO: **Chris Faulkner, Bramble Cottage, Chapel Lane, Snitterby, Gainsborough, DN21 4TX**

ENTRANT:	
Name:	
Address:	
Entrants Licence No.	

CAR DETAILS:	
Reg No.	
Make:	Model:
Colour:	C.C.
ROAD RALLY CLASS:	
Expert /Semi Expert/ Novice	

Forename	Surname
DRIVER:	
Address:	
Tel No.	
Email:	
Club:	Licence No.
NAME & ADDRESS OF NEXT OF KIN TO BE NOTIFIED IN CASE OF SERIOUS ACCIDENT	
Name:	
Address:	
Tel No.	

Forename	Surname
NAVIGATOR:	
Address:	
Tel No.	
Email:	
Club:	Licence No.
NAME & ADDRESS OF NEXT OF KIN TO BE NOTIFIED IN CASE OF SERIOUS ACCIDENT	
Name:	
Address:	
Tel No.	

INSURANCE (please tick as appropriate)
1) I have my own insurance <input type="checkbox"/>
Company: _____ Policy No. _____
2) I wish to use Lockton Rally Scheme <input type="checkbox"/>
3) I cannot sign any of the declarations. (Help required) <input type="checkbox"/>

FEES	£p.
ENTRY FEE (including 2 breakfasts)	60.00
Lockton Insurance (If required)	30.10
Total:	£
I enclose Cheque No. _____ made payable to:	
LINCOLN MOTOR CYCLE & CAR CLUB LTD.	

SEEDING INFORMATION - Enter below details of your best results over the last 3 years on Road / Navigational Rallies.			
YEAR	RALLY	STATUS	OVERALL POSITION

REMEMBER – All event documentation (Final Instructions, Results etc.) will be sent via email to the address(s) you have provided above. If this is unsuitable please enclose 3 postal address labels.