



ENTRY FORM

Gaby Mohr Memorial Car Trial Sunday 1st September 2024

This event is held under the General Regulations of Motorsport UK (incorporating the provisions of the international Sporting Code of the FIA) and the Supplementary Regulations for this event.

What to do with this form.....

1. Print out both pages of this form for each entry.
2. Fill in **CLEARLY** and **FULLY** and sign & date both pages.
3. Scan/photo and **PREFERABLY** email both pages to gabymohrtrial@hotmail.co.uk
OR Text/WhatsApp to 07910 835635 **by 4pm Tuesday 27th August latest.**
4. Transfer **£39** per entry to WSSCC's Barclays Bank account specifying Sort Code 20-97-78
Account 00958352, Account Name: Wolverhampton and South Staffordshire Car Club Ltd.
Please include the reference GMTRIAL followed by your name

	Driver	Passenger
Full name		
Address		
Post code		
Telephone (day)		
Telephone (eve)		
Email address		
Club		
Motorsport UK Lic No		

CLASS

A, B, C, D or S	
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CHAMPIONSHIPS - tick all which apply

Motorsport UK	BTRDA	BTRDA AR	CMSG	AWMMC	ANWCC	WAMC

VEHICLE

Make		Overall length in inches (Classes S, A and B only)	
Model		Standard gearbox & Final drive ratios (Classes A, B & C only) (Y/N)	
CC		Torque biasing diff or other traction control (Y/N)	
Registration		Minimum tyre pressure (psi)	

Signature: _____

Date: _____



**The Gaby Mohr Memorial Car Trial
Sunday 1st September 2024**

INDEMNITY

I declare that I have been given the opportunity to read the General Regulations of Motorsport UK 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 that 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.

	Driver	Passenger
Signature		
Date		
Age if under 18		

EMERGENCY CONTACTS Please give the name, telephone number and address of a relative or friend to be contacted in case of illness or accident.

	For Driver	For Passenger
Name		
Telephone number		
Address		

DECLARATION OF PARENT OR GUARDIAN (if competitor is under 18)

I understand that I 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 MSUK. I confirm that I have acquainted myself with the MSUK General Regulations, agree to pay any appropriate charges and fees pursuant to those Regulations (to include any appendices thereto) and hereby agree to be bound by those Regulations and submit myself without reserve to the consequences resulting from those Regulations (and any subsequent alteration thereof). Further, I agree to pay as liquidated damages any fines imposed upon me up to the maxima set out in Part 3, Appendix 1.

	For Driver	For Passenger
Signature		
Name		
Relationship		
Address		