



SPORTS CAR CLUB OF NEW ZEALAND INC.
CLUBSPORT ENTRY FORM

VENUE: HAMPTON DOWNS

DATE: SUNDAY, 31ST MARCH 2019

| OFFICIAL USE ONLY | |
|-------------------|-----------|
| Date Rec: | Audit: |
| Entry Con: Y N | Comp. No: |

EVENT: CIRCUIT SPRINT (SINGLE CAR)

ENTRY FEE : \$160 (SEE ANNEX A TO SUPP REGS FOR DETAILS)

FEE PAYMENT: CHQ/CASH DIRECT CREDIT

A Driver/Entrant Details

Driver's Name:

Address (not PO Box No):

Phone : () Email:.....

Emergency contact: Name:

Relationship: Phone: ()

Competition Licence Class: Licence No:

Competition Licence Expiry Date: End of/...../.....

Are you a MotorSport NZ-affiliated club member: YES NO

Club : Membership Expiry Date:/...../.....

Civil Driver's Licence No: Expiry Date:/...../.....

Required for statistical purposes: Male Female

Age Group: Under19 19-25 26-35 36-60 61+

Date of Birth (if under 19):/...../.....

Are you a "First Time" Competitor: YES

Entrant: (Required in all cases where the Entrant is other than the Driver. This Licence must be purchased from MotorSport NZ prior to the event)

Entrant's Name:

Address:

Entrant's Licence No:Licence Expiry Date:/...../.....

B1 Vehicle Details

Vehicle Make:Model & Year:

Vehicle Primary Colour: Capacity in cc:

Logbook No: Date of last Audit:/...../.....

Number of events since Audit: Preferred Competition No:

Best time in this car on this track:..... On another track:

B2 For Historic or Classic Vehicles – please complete:

Applicable Schedule (please tick): K T&C CR

Period Classification: COD Classification:.....

(Note: refer to the current MotorSport Manual, Appendix 6, Section 3, Part 2, Vehicle Categories for assistance in completing this section)

Privacy Act 1993 – Application

Notwithstanding the requirements of MotorSport New Zealand Inc. and/or Sports Car Club of NZ Inc. to collect data from this form for statistical and event organizational purposes, MotorSport New Zealand Inc. and/or Sports Car Club of NZ Inc. may also wish to use and publish competitor names and vehicle details for the purpose of producing event results and a magazine article relating to this event.

Do you consent to the compilation & publication of this information (please tick): YES NO

You have the right under the Act to access and correct this information.

1. Indemnity:
I have received the Supplementary Regulations and all other Regulations and Articles as required in the Appendices and Schedules of the current edition of the MotorSport Manual for the event I am entering in and agreed 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 Event detailed,

I agree not to pursue claims against and (severally) to save harmless and keep indemnified MotorSport New Zealand Inc, its members, its associated or affiliated clubs and entities, ClubSport and /or event organisers and promoters, the invited clubs and/or entities, circuit owners, providers and operators, owners 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, my team (including drivers, co-drivers, passengers management and/or mechanics) whatsoever or arising out of, or in connection with this entry or taking part in the events this entry relates, notwithstanding that such death, injury, loss or damage, may have been contributed to, or caused by the negligence of the Indemnified Parties and/or by any other person. This provision confers a benefit on, and is intended to be enforceable by each 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, whether permanent or temporary, which is likely to detrimentally affect my control of my vehicle or my fitness to drive same, I will not participate in that event.

3. Vehicle Conformance with Schedule A or AA – Declaration by Driver:
I declare that the vehicle detailed in this entry form complies with the vehicle safety items set out below 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, its Appendices and Schedules.

Critical Safety

| | | |
|--------------------------------------|---------------------|-----------------------|
| Helmet & Protective Clothing | Seat(s) & Mountings | Braking System |
| Safety Harness & Head/Neck Restraint | Fire Extinguisher | Steering & Suspension |
| Roll Protection & Window Nets | Wheels & Tyres | Fuel System |

Non-Critical Safety

| | | |
|---------------------------------|---------------------------|---------------------------|
| Engine and Transmission Mounts | Power Unit Mounts | Battery |
| Flexible Fluid Lines & Hoses | Exhaust System | Throttle Return(failsafe) |
| Ignition Switch/Circuit Breaker | Brake Lights | Lighting System |
| Rain/Rear Lights Doors | Reverse Gear operation | Starter Motor operation |
| Electric Wiring | Panels & Covers | Tow Eyes |
| Rear Vision Mirrors | Wipers and Demisters | Oil Catch Tank/s |
| Body/Chassis Condition | Interior Cockpit fittings | Bulkheads |
| Exterior Appearance | Aerofoils & Spoilers | |

Non Safety

| | | |
|-------------------------|---------------------|-----------|
| Ballast (Security) | Registration & WoF | LVV Plate |
| LVV/MSNZ Authority Card | Competition Numbers | |

I acknowledge 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.

4. Authority to disclose Medical Information:
I authorise the medical providers of the event to disclose medical information relevant to illness or injury sustained by me during the above mentioned event to MotorSport New Zealand Inc. and its officials.

Signature of Driver..... Date.....

Signature of EntrantDate.....
Note: If the Driver and Entrant are one and the same person, only the Driver's signature is required.

IMPORTANT NOTICE: If any of the above signatories is under the age of 16 years, then they must produce a Junior Competition Licence, or have the following completed by an authorised person:

I,of.....

(name) (address)

being the parent/guardian of.....

(full name of underage competitor)

do hereby consent to his/her participation in this event.

SignedDate