



# MSVR Sports & Sports Racing Series

Held under the General Regulations of The Motor Sports Association (incorporating the provisions of the International Sporting Code of the FIA) and the Supplementary Regulations

**ENTRY FORM TO BE COMPLETED IN BLOCK CAPITALS**  
A Separate Entry Form is Required for Each Car

**ENTRIES OPEN: On Publication**  
Entering this race meeting entitles you to free membership of MSVR

Please send the completed entry form to: Gemma Mole, MSVR, Brands Hatch, Fawkham, Longfield, Kent DA3 8NG

Date:  
(Internal use only)

Fee:  
(Internal use only)

Entrant/Team/Sponsor.....

Address (for Correspondence).....

.....Postcode.....

Telephone No. (Day).....Fax.....

Email Address (**Mandatory**).....

IS AN ENTRANTS LICENCE HELD IN THIS NAME? **YES / NO**  
(Delete as applicable)

**Format: MSVR Sports & Sports Racing, 1 x 20 minute qualifying, 2 x 20 minute races.**

**Name of Driver**

**Nationality**

**Particulars of Entry:**

Make/Model

Class Entered

Colour

Transponder Number

Year of Manufacture

Engine Make & Type

Cubic Capacity

Preferred Car Number

Have you raced at the below circuit(s) before? **Yes / No**

Permanent Residential Address of Driver:

**GENERAL DECLARATION FOR COMPLETION BY ALL COMPETITORS**

I hereby make application to participate in the National B Race Meeting(s) to be held at the date(s) and venue(s) below. I certify that the particulars of my entry and my vehicle as given are correct.

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 motor sport 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 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.

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.

**STATE YOUR AGE IF UNDER 18** (.....years old)

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.

Signature of Entrant or nominated representative:  Competition Licence No.

ASN Issuing Licence, e.g.MSA

Signature of Driver (If other than entrant):  Competition Licence No.

ASN Issuing Licence, e.g.MSA

Date.....

**IMPORTANT:** Any indemnity and/or declaration as prescribed by the paragraphs above that is signed by a person under the age of 18 shall be countersigned by that person's parents or guardian, whose full name and address shall be given below:

Full Name of Parent or Guardian.....

Relationship..... Signature.....

Address.....

.....Postcode.....

**TO BE COMPLETED BY ALL COMPETITORS**

In case of accident please contact the following:

Name..... Relationship.....

Address.....

.....Postcode.....

Telephone (Mobile).....

Race	Format	Entry Fee	Entering Y/N
7 June - Silverstone Nat	1 x 20 min qualifying, 2 x 20 min races	£150 (single event)	
13 June - Snetterton	1 x 20 min qualifying, 2 x 20 min races	£150 (single event)	
Total entry fee (if entering both only £200)		£	

**MSVR Sports & Sports Racing ENTRY FEE PAYMENT By credit/debit card**

Please complete the section below **in full**. Please note, we do not accept cheques.

I wish to pay by Visa / Delta / MasterCard / Maestro / JCB: I authorise you to debit my account with the amount of £

My Card Number:  Security Code:  Issue Number: Maestro cards only

Start Date: (If shown): Maestro/Switch cards  Expiry Date:  Name: (as on card) ..... Signature.....

Card Holder's Address .....

..... Postcode..... Telephone: .....

**DEFACED, INCOMPLETE OR AMENDED ENTRY FORMS ARE INVALID**

Organised by MotorSport Vision Racing, Brands Hatch Circuit, Fawkham, Longfield, Kent DA3 8NG Tel: + (0) 1474 875263 Fax: + (0) 1474 874766 E-mail: [gemma.mole@motorsportvision.co.uk](mailto:gemma.mole@motorsportvision.co.uk)

[www.msvracing.co.uk](http://www.msvracing.co.uk)  
(Click 'Calendar' for more event information)