

MG Car Club (Wellington Centre) Inc
The MG Classic Race
ENTRY FORM



Race Number Allocated
(Please leave blank)
Preferred Race Number
(Maximum 3 digits only)

PLEASE RECORD THIS ENTRY FOR

Date of Meeting: 13th, 14th and 15th November 2020

Circuit: Manfeild Circuit, Feilding

Class Entered: (please tick)					
Classic		Allcomers (including Schedule K and Group A Cars)		NZ Sports Cars, Formula Libra, Formula Atlantic	
Tranzam Challenge		Historic Muscle & Saloon Cars		Historic Racing Cars, Single Seaters and Formula Juniors	
Historic Sports Sedans		Central Muscle Cars		Pre 65 Racing Saloons	
Formula 5000					
Driver / Entrant Details:					
Driver's Name					
				First Time Driver (3 or fewer events) (please tick)	<input type="checkbox"/>
				First Time Competitor at Venue (please tick)	<input type="checkbox"/>
				Foreign Participant on Non-MSNZ Licence (please tick)	<input type="checkbox"/>
Physical Address					
(post code)					
Postal Address for Entry Details (if different from Physical Address)					
(post code)					
Email Address					
Telephone – Home		Telephone - Business		Telephone - Mobile	
Competition Licence Number		Licence Expiry Date / /		Licence Grade: (please tick)	
				<input type="checkbox"/> International Race Grade C	
				<input type="checkbox"/> National Race / C1 Grade	
				<input type="checkbox"/> National Race / C2 Grade	
Financial Member of the following MotorSport NZ Member Club: (Name of club)				Club Membership Expiry Date: / /	
Required for statistical purposes					
Age Group (please circle appropriate): Under 18 18-25 26-35 36-60 61 plus					
Vehicle Details					
Vehicle Make			Vehicle Model		
Colour			Year		
Capacity in cc		Log Book No (All vehicles)		Certificate of Description (Schedule K or T&C where applicable)	
Your Fastest Lap at Manfeild in the Car Entered					
Emergency Contact					
Name:		Relationship:			
Contact Telephone No:					

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, race and/or event organisers and promoters, the inviting club and entity (or entities), race 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, and/or my team (including drivers, co-drivers, passengers, management and/or mechanics) whatsoever, caused or arising out of or in connection with this entry or taking part in the events to which this entry relates, notwithstanding that such death, injury, loss or damage may have been contributed to or caused by the negligence of any 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 (Privacy) 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 automobile or my fitness to drive, I will 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 style="list-style-type: none"> • Helmet • Head & Neck Restraint • Protective Clothing • Safety Harness • Window Net(s) • Roll Bar / Safety Cage • Seat(s) and Mounts • Fire Extinguisher • Wheels and Tyres • Brake System • Steering & Suspension Systems • Fuel Tank(s) / Fillers / Lines 	<ul style="list-style-type: none"> • Engine & Transmission Mounts • Flexible Fluid Lines & Hoses • Throttle Return (Failsafe) • Engine Starter Operation • Reverse Gear Operation • Exhaust System • Oil Catch Tank(s) • Electrical Wiring • Ignition / Circuit Breaker • Battery • Lighting Systems • Brake Lights 	<ul style="list-style-type: none"> • Rear Lights / Rain Lights • Bodyshell / Chassis Condition • Exterior Appearance • Panels / Covers • Doors • Windows • Wipers & Demisting • Rear Vision Mirrors • Aerofoils & Spoilers • Cockpit Construction / Fittings • Bulkheads • Tow Eyes
		<ul style="list-style-type: none"> • Ballast (Security) • Competition Numbers • Registration & WOF Labels • LVV / MSNZ Authority Card • LVV Plate • Optional Equipment

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. Consent:

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 Race Meeting concerned, and Motorsport in general. I acknowledge my right to access and correction of 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 New Zealand and it's officials.

Signature of Driver:.....Date:

FOR ENTRY TO BE CORRECT, PLEASE ENSURE SIGNATURES ARE COMPLETED PRIOR TO POSTING

Entry Fee: **\$ 375**

Late Fee after 13th October 2020 of \$40) \$ _____
 This is a compulsory donation to the Cancer Society or Kara Hands

Drivers received 4 Entry Passes for the Weekend

For extra Entry Passes – how many? _____

And give a donation to CANCER \$ _____

Optional donation to our Cancer charity * \$ _____
 The Cancer Society or Kara Hands Charitable Trust

Total Enclosed (GST Incl) ** \$ _____
 Please make cheques payable to: "MG Car Club"

* If you wish to make a donation you can include a separate cheque to the "Cancer Society" or "Kara Hands Charitable Trust" which we will forward on your behalf. You will receive a charitable tax-deductible receipt if over \$20.

** Payment may be made to **030525 0217704 00**, with your name and car number for our bank statement. Please also note this on your entry form and send an email to ron@mgcarclub.org.nz advising date payment made, amount and car number so we can match to your Entry form.

EITHER POST THIS ENTRY TO: MG Classic Racing, PO Box 164, Wellington; or
SCAN AND EMAIL THIS ENTRY TO: ron@mgcarclub.org.nz