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| RACE NUMBER: |
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**201 TRANSPREC GT OIL TRACK DAY SERIES.
OFFICIAL ENTRY FORM**

| | | |
|---------|-----------------------------------|--|
| ROUND 1 | Saturday April 7 th | |
| ROUND 2 | Sunday September 16 th | |
| ROUND 3 | Saturday November 3 rd | |
| ROUND 4 | Saturday December 8 th | |

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|--------------------------------|--|
| NAFWD | |
| NARWD | |
| FI and NA2WD over 3500cc | |
| Rookie new to competition 2018 | |

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|--|-----|-----------------------------|--------------|--|--------|
| A: DRIVER / ENTRANT DETAILS: | | | | | |
| First Time Driver: | | First Time Driver at Venue: | | Foreign Participant on Non-MSNZ Licence: | |
| Driver Name: | | | Mobile No: | | |
| Physical Address: | | | | | |
| Postal Address: | | | | | |
| Email Address: | | | | | |
| Emergency Contact: | | Relationship: | | Mobile: | |
| MSNZ Licence No: | | Licence Grade: | | Licence Expiry Date: | |
| Financial Member of MSNZ Car Club: | | | | Car Club Expiry Date: | |
| Age Group: | U19 | 19-25 | 26-35 | 36-60 | 61+ |
| | | | | Male | Female |
| Do you currently hold a valid Civil Drivers Licence: (circle) | | | | Yes | No |
| B: VEHICLE DETAILS: | | | | | |
| Vehicle Make & Model: | | | Car No: | | |
| Colour: | | | CC Capacity: | | |
| MSNZ Logbook No: | | | Class: | | |
| AMB Transponder No: | | | | | |
| Sponsors: | | | | | |
| C: ENTRANT DETAILS: (If the driver is the Entrant do not fill in) | | | | | |
| Entrant Name: | | | | | |
| Entrant Address: | | | | | |
| Entrant Licence No: | | | Expiry Date: | | |
| D: PAYMENT AND ENTRY INSTRUCTIONS: | | | | | |
| <ul style="list-style-type: none"> • Competitors need to fill only one entry form for the whole series and sign in at each meeting • Cheques are payable to The Manawatu Car Club. Direct Credit: 01-0745-0021156-05 - use Name and Class as the reference. • Online payments can be made at www.manawatucarclub.org.nz Transpec GT Oil Track Day Series • ENTRY FEE \$90 (incl GST) A GST invoice may be issued on request. \$10 discount for Manawatu Car Club members. • If you enter LATER than the Entry Closing Dates listed in the Supplementary Regulations the LATE PAYMENT FEE is \$20.00 | | | | | |

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, ClubSport 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 (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 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 |
|---|---|---|--|
| 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 | 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 | 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 | Ballast (Security) Competition Numbers Registration & WOF Labels LVV / MSNZ Authority Card 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 Meetings or Events 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 NZ and its officials.

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|--------------------|--------------|---------------|--------------|--------------|
| Driver's Signature | | | | |
| Date | R1 7/04/2017 | R2 16/09/2017 | R3 3/11/2017 | R4 8/12/2017 |

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

Signature of Entrant:.....Date:

Note: If Driver and Entrant are the same, only one signature is required to cover the (1) Indemnity, (2 & 3) Declarations and (4) Consent

IMPORTANT NOTE: If any of the above signatories are 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

(full name)

(address)

being the parent/ guardian of do hereby consent to his/her participation in the event.

(full name of underage competitor)

Signed: Date:

