

Boundless/CSMA Club (Southern) (Farnborough Group)

TOPOGRAPHIA RALLY SUNDAY October 6th 2024

ENTRY FORM

Please send the completed entry form with your entry fee (£12.00) to;

David Pegg, 280A Worplesdon Road, Guildford GU2 9XW.

Cheques should be made payable to CSMA Farnborough Group

Alternatively, e-mail the entry form and pay on the day. david.pegg@ntlworld.com.

Entrant..... Club.....

Address.....

.....

Telephone number..... Email.....

Driver's Name..... Club.....

Navigator's name..... Club.....

Vehicle make..... Reg. No.....

CLASS EXPERT /NOVICE / BEGINNER (please delete that not appropriate)

DECLARATION

I have read the Supplementary Regulations issued for this event and agree to be bound by them and the General Regulations of the MSA. In consideration of the acceptance of this entry or of my being permitted to take part in this event, I agree to save harmless and keep indemnified the MSA, such person or persons or body as may be authorised by the MSA to promote or organise this event and their respective actions, claims, costs, expenses and demands in respect of death or injury to myself howsoever caused arising out of or in connection with this entry or my taking part in this event, and not withstanding that the same may have contributed to or occasioned by the negligence of the said bodies, their officials, servants, representatives or agents.

Furthermore, in respect of any parts of this event on ground where third party insurance is not required by law this agreement shall in addition to the parties named above extend to all and any other competitor/s and their servants and agents and all actions, claims, costs, expenses and demands in respect of loss or damage to the person or property of myself, my driver or passengers.

I declare that the use of the car hereby entered is covered by insurance as required by law which is valid for such parts of the event as shall take place on roads as defined by law.

Signature of Driver Age if under 18.....

Signature of Navigator..... Age if under 18.....

Name and address to be notified in case of serious accident.....

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Name & address of Insurance Co.....