## 70 YEARS OF ROAD RACING CAVALCADE – 2<sup>ND</sup> JUNE 2017

Please fill in your contact details and sign the disclaimer and add as much detail as you can about your vehicle for the commentators .

I would like to take part in the above event but understand that this form does not give me automatic entry as participants will be chosen from the final entries.

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NAME		
ADDRESS		
EMAIL		
TEL HOME	Car Club:	
MOBILE NO	Invited to participate by:	
vehicle is in a fit and roadwort  I understand the dangers and these risks may give rise to my acceptance of my participation representatives and agents (th participation in the Event inclu caused. Nothing in this clause i	If the event and the potential risk inherent with a motoring cavalcade with spectators. I declare that the condition.  It accidents causing death, injury, disability and property damage can and do happen. I understand the ffering personal injury or other loss and I acknowledge and accept these risks. In consideration of the igree that neither any one of or any combination of the organisers or associated clubs or club member Parties") shall have any liability for loss or damage which may be sustained or incurred by me as a resumble to the damage to property, economic loss, consequential loss or financial loss howsoeven tended to or shall be deemed to exclude or limit liability for death or personal injury.  I alaw I agree to indemnify and hold harmless each of the Parties in respect of any loss or damage agroom my participation in this event.	at e rs, sult o
Signature:	Date:	
PERSON TO BE NOTIFIE	IN CASE OF A SERIOUS ACCIDENT (required):	
Name (required)		
Telephone No (required		
Relationship (required)		
VEHICLE MAKE	VEHICLE MODEL VEHICLE YEAR	
Comments: History of the	ar – and any distinguishing facts of interest	