Important Notes for users of this Official MotorSport NZ Entry Form

1. The following two pages are the Official MotorSport NZ Entry Form that is to be used for all manual entries to Races. **This form is only to be used if the entry has not been completed via the MotorSport Online system.**

2. **The fields highlighted grey with an asterisk are compulsory** (driver and vehicle).

3. This Entry Form is supplied in Word Format to allow Meeting and Event Organisers to add in their club Logo and other pertinent Club and mailing details. In the Headings of the form we request that the MotorSport NZ logo is not removed.

4. Provision exists under item A to add in the meeting dates.

5. Item E2 has been prepared in conjunction with the Historic and Classic Advisory Commission for all Historic and / or Classic Meetings, as it will encourage competitors to use the correct terminology and assist in clarification of a vehicles true identity. This item may be deleted for other Race Meetings.

6. The Indemnity and Declaration and Consent segment has been checked for legal correctness and application **it must not be changed.**
**SAMPLE CAR CLUB INC**

**NAME OF MEETING**

**ENTRY FORM**

PLEASE RECORD THIS ENTRY FOR

<table>
<thead>
<tr>
<th>A</th>
<th>Date of Meeting:</th>
</tr>
</thead>
<tbody>
<tr>
<td>B</td>
<td>Class Entered</td>
</tr>
</tbody>
</table>

| C | Sponsors (for program): |

<table>
<thead>
<tr>
<th>D</th>
<th>Driver / Entrant Details:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Driver’s last Name*:</td>
<td>First Time Driver (3 or fewer events) (please tick)</td>
</tr>
<tr>
<td>Driver’s First Name*:</td>
<td>First Time Competitor at Venue (please tick)</td>
</tr>
<tr>
<td>Email Address*:</td>
<td>Foreign Participant on Non-MSNZ Licence (please tick)</td>
</tr>
</tbody>
</table>

Date of Meeting:

Class Entered:

Sponsors (for program):

Driver / Entrant Details:

Driver’s last Name*:

Driver’s First Name*:

Email Address*:

Physical Address

Postal Address for Entry Details

Telephone - Home

Telephone - Business

Telephone - Mobile

Competition Licence No: ......................................................

Expiry Date ........ / ........ / ........

Licence Grade: (please tick)

\[ \] INT C Grade

\[ \] C2 Grade

\[ \] C1 Grade

Financial Member of the following MotorSport NZ Member Club:

(Name of club) Club Membership Exp Date: .

Currently is your NZ civil driver’s licence disqualified?  Y / N

If YES, than you must sign a declaration at Documentation as per NSC 43(2)(b)

Required for statistical purposes

Age Group (please circle appropriate): Under 19 19-25 26-35 36-60 61 plus

Emergency

Name: Relationship:

Contact: Contact Telephone Number:

Entrant: (to be completed in all cases if Entrant is other than the driver. Licence must be purchased from MotorSport NZ Inc prior to the event in question and presented at documentation)

Entrant’s Name

Postal Address

Email Address

Telephone - Home

Telephone - Business

Telephone - Mobile

Fax Number

Entrants Licence Number

Licence Expiry Date

... / ........ / ......

E 1 **Vehicle Details**

Vehicle Make*:

Vehicle Model*:

Chassis Number*:

Colour:

Permanent Race No:

Transponder Number:

Capacity in cc

Log Book No

Certificate of Description (Schedule K or T&C where applicable)

E 2 ----FOR HISTORIC OR CLASSIC VEHICLES - PLEASE COMPLETE THE FOLLOWING

1. Tick appropriate box below to confirm which Appendix Six Schedule the vehicle complies with.

2. In the appropriate box below to confirm the applicable period classification or group from the Schedule.

Schedule K Schedule K Period Classification

Schedule T & C Schedule T & C Group

Schedule CR Schedule CR period grouping

NOTE: Refer to the Appendix Six Section Three Vehicle Classification Part Two for assistance in completing this section of the entry form

3. Year of Vehicle Manufacture:

Note: Actual year of completion of manufacture for this particular vehicle

F** Complete if GST Registered:**

Name of Person / Company / Team Registered:

GST Registration 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 (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.

<table>
<thead>
<tr>
<th>Critical Safety</th>
<th>Non-Critical Safety</th>
<th>Non Safety</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helmet</td>
<td>Engine &amp; Transmission Mounts</td>
<td>Ballast (Security)</td>
</tr>
<tr>
<td>Head &amp; Neck Restraint</td>
<td>Flexible Fluid Lines &amp; Hoses</td>
<td>Competition Numbers</td>
</tr>
<tr>
<td>Protective Clothing</td>
<td>Throttle Return (Failsafe)</td>
<td>Registration &amp; WOF Labels</td>
</tr>
<tr>
<td>Safety Harness</td>
<td>Engine Starter Operation</td>
<td>LVV / MSNZ Authority Card</td>
</tr>
<tr>
<td>Window Net(s)</td>
<td>Reverse Gear Operation</td>
<td>LVV Plate</td>
</tr>
<tr>
<td>Roll Bar / Safety Cage</td>
<td>Exhaust System</td>
<td>Optional Equipment</td>
</tr>
<tr>
<td>Seat(s) and Mounts</td>
<td>Oil Catch Tank(s)</td>
<td></td>
</tr>
<tr>
<td>Fire Extinguisher</td>
<td>Electrical Wiring</td>
<td></td>
</tr>
<tr>
<td>Wheels and Tyres</td>
<td>Ignition / Circuit Breaker</td>
<td></td>
</tr>
<tr>
<td>Brake System</td>
<td>Battery</td>
<td></td>
</tr>
<tr>
<td>Steering &amp; Suspension Systems</td>
<td>Lighting Systems</td>
<td></td>
</tr>
<tr>
<td>Fuel Tank(s) / Fillers / Lines</td>
<td>Brake Lights</td>
<td></td>
</tr>
</tbody>
</table>

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.

Signature of Driver: __________________________ Date: ______________
Signature of Entrant: __________________________ Date: ______________

FOR ENTRY TO BE CORRECT, PLEASE ENSURE SIGNATURES ARE COMPLETED PRIOR TO POSTING
Note: If Driver and Entrant are the same, only one signature is required to cover the (1) Indemnity, (2 & 3) Declarations and (4) Consent

POST THIS ENTRY TO: 

Please make cheques payable to: __________________________
Or Direct Credit to: __________________________

Bank:_________________________

TAX INVOICE

GST No.

Visa/Master/Bankcard Details (tick)
Card Number: __________________________ Expiry Date: __________________________

Name of Card Holder: __________________________

Signature: __________________________ Amount $ __________________________