



EVENT NAME: MSYA RALLY TRINIDAD 2010

EVENT DATE: March 26-28, 2010

I agree to be bound by the General Competition Rules of the Trinidad & Tobago Rally Club. 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 Trinidad and Tobago Rally Club, Sponsors, such person, persons, or body as may be authorized by the Trinidad and Tobago Rally Club, to promote or organize this event and their respective officials, servants, representatives, and agents against all action, claim, 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 notwithstanding that the same may have been 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 insurances is not required by 'the law', this agreement shall in addition to the parties named above, extend to all and any other competitor(s) and their servants, and to all actions, claims, costs, expenses, and demands in respect of loss or damage to person or property of myself, my driver(s), passenger(s) or mechanic(s) but shall not extend to a competitor adjudged guilty of reckless driving under the same General Competition Rules.

In the case of any event taking place wholly or partly on the public Highway 'I declare that the use of the vehicle hereby entered will be covered by insurance and required by 'the law' which is valid for such part of this event as shall take place on roads as defined by 'the law'. **By signing this form I declare that I have read and understood the conditions of Release and Indemnity.**

COMPLETE AND RETURN TO ANY MEMBER OF THE TTRC ORGANIZING COMMITTEE

Car Registration (Local Vehicles ONLY): _____ Make/Model: _____

Engine cc: _____ Group (1, 2, 3, S, WRC): _____ Class (1, 2, 3, 4, N, A): _____
Please refer to TTRC rule book for vehicle grouping and class (Section 6.0)

DRIVER NAME: _____ CO-DRIVER NAME: _____

ADDRESS: _____ ADDRESS: _____

EMAIL: _____ EMAIL: _____

PHONE CONTACT: _____ PHONE CONTACT: _____

BLOOD TYPE: _____ D.O.B: _____ BLOOD TYPE: _____ D.O.B: _____

SIGNATURE: _____ SIGNATURE: _____

EMERGENCY CONTACT (NAME): _____ (PHONE): _____

(If under the age of 18) GUARDIAN NAME: _____ SIGNATURE: _____

ENTRY FEE: LOCAL – US\$300.00 / FOREIGN – US\$600.00

SPONSORS: _____ TEAM NAME: _____

FOR OFFICIAL USE ONLY

Total Payment Received: _____ Payment Method: CASH / CHQ Received by: _____

COMPETITOR APPROVED BY: _____ COMPETITOR #: _____