

V.C.R.R. Rallies "BAGGER 19" Entry Form

Driver		Navigator	
Name		Name	
Address		Address	
Postcode		Postcode	
E mail		E mail	
Tel no		Tel no	
Vehicle Details			
Make		Model	
Capacity		Reg No	
Year		Colour	
Class	Expert	- Novice	(delete as necessary)
Insurance			
Entrants must make sure that they have the relevant cover for their vehicle			
I wish to use the organisers scheme			Yes / No
Please give non organisers insurance details			
Company		Policy	
Address			
Fees			Total in UK pounds
EARLY BIRD WITH TWO BREAKFASTS (paid by 14th Jan 2019)			£110
LATE ENTRY FEE (After 14/01/19)			£130
Insurance (subject to confirmation)			£18
Total			
<p>Please make all cheques to VCRR Rallies and send with the completed form to; Rally Secretary, The Rally Office, 55 Dorchester Road, Poole Dorset. BH15 3JX. Tel 01202 241724 (mobile 07831 266478) You may also pay by bank transfer details overleaf. Please confirm all transfers by e-mail to info@vcrr.eu</p>			

If you decide to pay fees by Bank transfer you can transfer funds to the following account.

Nationwide.

BRANCH SORT

CODE - 07 04 36 ACCOUNT NUMBER - 09762425

BANK TRANSFERS SHOULD USE THE REFERENCE - "2019 Bagger" FOLLOWED BY YOUR SURNAME. PLEASE NOTE - After transferring funds please send a confirmation e-mail to us so as we are able to confirm all payments and issue a receipt as soon as possible.

Please contact us if you wish to pay by Paypal

Seeding information (optional)

Event	Year	Status	Pos o/a	Class

Declaration

I declare that I will be given the opportunity to read the supplementary regulations for the event and agree to be bound by them. I declare that I am physically and mentally fit to take part in the event and I am competent to do so. I acknowledge that I understand the nature and type of the competition and the potential risk. Further I understand that all persons having any connection with the promotion and/or organisation and/or conduct of the event are insured against loss or injury caused through their negligence. I declare that the use of the vehicle entered will be covered by insurance as required by law, which is valid for such part of this event as shall take place on public roads as defined by the law. If I am the parent / guardian/ guarantor of the driver " I understand I have the right to be present during any procedure being carried out under the supplementary regulations issued for this event.

Drivers Signature

Navigators Signature

Date of birth

Date of birth

Any competitor under the age of 18 will have to fill in a separate declaration and a parent/ guardian consent form, which is available on request

Please give name and telephone number of next of kin

Driver		Tel no	
Navigator		Tel no	

Please view all details at WWW.VCRR.EU
Contact us at info@VCRR.EU