

Competition Number <input style="width:90%;" type="text"/>	PRINT Driver's Name <input style="width:90%;" type="text"/>	Register for the NSW ORC - POINTSCORE X in YES or NO Competitor ONLY	Yes <input type="checkbox"/> No <input type="checkbox"/>
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SORRA 2011 COLO PARK CHALLENGE

EVENT ENTRY FORM

Held under the International Sporting Code of the FIA and the National Rules of CAMS

Competition Number

PERMIT No:

Date: 19 & 20 November 2011

Event: 2011 Colo Park Challenge

PLEASE CIRCLE Scrutiny Venue: CROOKWELL - KEMPSEY - SINGLETON - SYDNEY - TAREE - WARILADA

COMPETITORS (as shown in Log Book)	VEHICLE DETAILS (as shown in Log Book)
Full Name: _____ <input type="checkbox"/> <small>Please PRINT CLEAR</small> Postal Address: _____ <input type="checkbox"/> _____ <input type="checkbox"/> Postcode: _____ <input type="checkbox"/> CAMS Licence No: _____ <input type="checkbox"/> Expiry: _____ <input type="checkbox"/>	Make: _____ <input type="checkbox"/> Capacity cc: _____ <input type="checkbox"/> Year Model: _____ <input type="checkbox"/> Colour: _____ <input type="checkbox"/> Body Type: _____ <input type="checkbox"/> Chassis No: _____ <input type="checkbox"/> Engine Type: _____ <input type="checkbox"/> CAMS Log Book No: _____ <input type="checkbox"/>

DRIVER (Please PRINT CLEAR)	CO - DRIVER (if applicable)
Full Name: _____ <input type="checkbox"/> (Pseudonyms): _____ <input type="checkbox"/> D.O.B: _____ <input type="checkbox"/> Address: _____ <input type="checkbox"/> _____ <input type="checkbox"/> Postcode: _____ <input type="checkbox"/> CAMS Licence No: _____ <input type="checkbox"/> Expiry: _____ <input type="checkbox"/> Club & Membership No: _____ <input type="checkbox"/> Contact No: _____ <input type="checkbox"/> Email: _____ <input type="checkbox"/> Emergency Name: _____ <input type="checkbox"/> Contact No (Daytime): _____ <input type="checkbox"/>	Full Name: _____ <input type="checkbox"/> (Pseudonyms): _____ <input type="checkbox"/> D.O.B: _____ <input type="checkbox"/> Address: _____ <input type="checkbox"/> _____ <input type="checkbox"/> Postcode: _____ <input type="checkbox"/> CAMS Licence No: _____ <input type="checkbox"/> Expiry: _____ <input type="checkbox"/> Club & Membership No: _____ <input type="checkbox"/> Contact No: _____ <input type="checkbox"/> Email: _____ <input type="checkbox"/> Emergency Name: _____ <input type="checkbox"/> Contact No (Daytime): _____ <input type="checkbox"/>

NAVIGATOR ONE (Please PRINT CLEAR)	NAVIGATOR TWO (if applicable)
Full Name: _____ <input type="checkbox"/> (Pseudonyms): _____ <input type="checkbox"/> D.O.B: _____ <input type="checkbox"/> Address: _____ <input type="checkbox"/> _____ <input type="checkbox"/> Postcode: _____ <input type="checkbox"/> CAMS Licence No: _____ <input type="checkbox"/> Expiry: _____ <input type="checkbox"/> Club & Membership No: _____ <input type="checkbox"/> Contact No: _____ <input type="checkbox"/> Email: _____ <input type="checkbox"/> Emergency Name: _____ <input type="checkbox"/> Contact No (Daytime): _____ <input type="checkbox"/>	Full Name: _____ <input type="checkbox"/> (Pseudonyms): _____ <input type="checkbox"/> D.O.B: _____ <input type="checkbox"/> Address: _____ <input type="checkbox"/> _____ <input type="checkbox"/> Postcode: _____ <input type="checkbox"/> CAMS Licence No: _____ <input type="checkbox"/> Expiry: _____ <input type="checkbox"/> Club & Membership No: _____ <input type="checkbox"/> Contact No: _____ <input type="checkbox"/> Email: _____ <input type="checkbox"/> Emergency Name: _____ <input type="checkbox"/> Contact No (Daytime): _____ <input type="checkbox"/>

READ AND SIGN DISCLAIMER ON BACK

EFT Details: BSB & ACC No: 032-388 126-860 Account Name: Sydney Off Road Racing Association Make Cheque or M/O Payable to: _____	Post Entry to: 'Event Secretary' - SORRA 20 HELEN STREET MOUNT HUTTON NSW 2290	Email Entry to: cristiemitchell@optusnet.com.au Faxed Entry to: (02)49561747
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ENTRY FEES: (insert \$ _____.00) if paid by (insert DAY) the (insert DATE) or (insert \$ _____.00) by final closing at 5pm on (insert DATE).

OFFICE USE ONLY					
Date Received: _____	Time: _____	Amount: \$ _____ <input type="checkbox"/>	Cash: <input type="checkbox"/>	EFT Dep Reference: _____ <input type="checkbox"/>	VISA: _____
Name of Club Official Received by: _____ <input type="checkbox"/>		Cheque or Money Order No: (delete one) _____		Drawer Name: _____ Chq/MO No: _____	
Date Received by the Event Secretary: _____			Event Secretary Signature: _____		

**DISCLAIMER
EXCLUSION OF LIABILITY, RELEASE AND ASSUMPTION OF RISK
COMPETITORS AND/OR COMPETING CREWS
IN OFF ROAD EVENTS**

For Competitors

I/We being the competitor/s of the vehicle described on this Entry Form wish to enter that vehicle for the above event.

For Competitors and competing crew members

I/We being the competitor/s and/or driver and/or co-driver and/or navigator and/or pit crew, certify that the particulars on this form are true and correct in every particular, to the best of my/our knowledge and belief.

I/We declare that I/we have read and understood the Supplementary Regulations issued for the event, and agree to be bound by them and the provisions of the National Competition Rules of the Confederation of Australian Motor Sport Limited ("CAMs").

In exchange for being able to attend or participate in the event (including entering the event), I agree:

to release CAMs and Australian Motor Sport Commission Ltd, promoters, sponsor organisations, land owners and lessees, organisers of the event, their respective servants, officials, representatives and agents (collectively, the "Associated Entities") from all liability for my death, personal injury (including burns), psychological trauma, loss or damage (including property damage) ("harm") howsoever arising from my participation in or attendance at the event, except to the extent prohibited by law;

that CAMs and the Associated Entities do not make any warranty, implied or express, that the event services will be provided with due care and skill or that any materials provided in connection with the services will be fit for the purpose for which they are supplied; and

to attend or participate in the event at my own risk.

I/we acknowledge that:

the risks associated with attending or participating in the event include the risk that I may suffer harm as a result of:

motor vehicles (or parts of them) colliding with other motor vehicles, persons or property;

acts of violence and other harmful acts (whether intentional or inadvertent) committed by persons attending or participating in the event; and

the failure or unsuitability of facilities (including grand-stands, fences and guard rails) to ensure the safety of persons or property at the event.

motor sport is dangerous and that accidents causing harm can and do happen and may happen to me.

I accept the conditions of, and acknowledge the risks arising from, attending or participating in the event and being provided with the event services by CAMs and the Associated Entities.

I understand that this disclaimer is not intended to exclude any valid claim I may have under the CAMs Personal Insurance Scheme.

	<u>PRINT</u>	<u>SIGNATURE</u>	<u>Checked OFF with</u> <u>TICK</u>	<u>DATE</u>
Competitors Signature: _____		_____	<input type="checkbox"/>	_____
Driver Signature: _____		_____	<input type="checkbox"/>	_____
Co - Driver Signature: _____		_____	<input type="checkbox"/>	_____
Navigator One Signature: _____		_____	<input type="checkbox"/>	_____
Navigator Two Signature: _____		_____	<input type="checkbox"/>	_____
Pit Crew 1 Print Name & Signature: _____		_____	<input type="checkbox"/>	_____
Pit Crew 2 Print Name & Signature: _____		_____	<input type="checkbox"/>	_____
Pit Crew 3 Print Name & Signature: _____		_____	<input type="checkbox"/>	_____
Pit Crew 4 Print Name & Signature: _____		_____	<input type="checkbox"/>	_____

For persons under the age of 18 years the following parent/guardian consent must be completed

PARENT / GUARDIAN CONSENT - PERSONS UNDER 18 YEARS OLD

Print the *Competitor/Driver/Navigator or Passenger Name who is under 18 years old:

I of [Address] am the parent/ guardian* of the above-named ("the minor") who is under 18 years old. I have read this document and understand its contents, including the exclusion of liability and assumption of risk, and have explained the contents to the minor. I consent to the minor attending/ participating in* the event at his/her own risk.

Signed: _____ Date: _____
Parent / Guardian *

* delete whichever does not apply