THE GUYANA MOTOR RACING & SPORTS CLUB APPLICATION TO ENTER ENDURANCE RACE MEETING

Competitor	's No:		
Please print in	n bold letters:		
1. NAME	OF DRIVER (1)	Blood	Туре:
	Date of Birth:		
D	rivers license no:		
	Address:		
En	nail Address:		
	Tel. no:		
2.NAME (OF DRIVER (2)	Blood '	Гуре:
	Date of Birth:		
Dr	ivers license no:		
	Address:		
En	nail Address:		
	Tel. no:		
3. (a) Make	of Machine:		
(b) Type	/Model:		
(c) Color	:		
(d) Cubic	capacity in cubic centimeters: Tick whe	ere is applicable.	
CLA	SSES		
(i)	Up to 1500cc		
(ii)	1501cc – 1600cc		
(iii)	1601cc 2000cc		
(iv)	Unlimited		
() 3371 41	er turbo charged or super charged		

Entry Fees: \$5,000 per team + 14% VAT= \$5,700.00
Signature of Driver (1):
Driver (2):
Date:
THE GUYANA MOTOR RACING & SPORTS CLUB
COMPETITORS DECLARARTION
I, understand that my participation in all games,
trials and competitions organized by the club, its officers, servants and agents, is done at
my own risk, and that I absolve them from and against all actions, suits, causes of actions
and suits, fines, losses, damages and expenses of every description which the club may be
put to or sustain in consequences of or arising from my participation in any games, trials
and competition organized by the club.
I declare that to the best of my belief, the driver(s) possess(es) the standard of
competence necessary for an event to which this entry relates, and that the machine(s)
entered is (are) suitable and roadworthy for the event having regard to the course and to
the speeds which will be reached.
I further declare that I have and am conversant with the rules and regulations of the club
and understand them fully, and that I have read the above declarations and agree with
them fully.
Signature of Driver(1):
Driver(2)
Date: