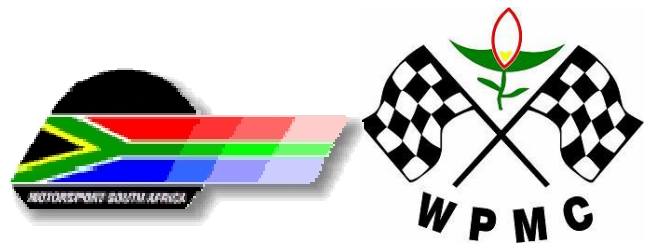


KILLARNEY MOTOR RACING CIRCUIT – RACE ENTRY FORM 2010

WESTERN PROVINCE MOTOR CLUB
 Killarney Motor Racing Circuit
 P.O. Box 220 TABLE VIEW 7439
 Tel: 021 557 1437 / 021 557 1639
 Fax: 021 557 6904
 e-mail: entry@wpmc.co.za



DATE OF RACE MEETING:

RACE/S ENTERED.....
 NO.....CLASS.....

ENTRY FEE	WPMC
R.....	Membership No:
Paid:.....

National R1500 / Club R760 / WPMC Member R660 / 2nd Entry same vehicle R330 / 2nd Entry different vehicle R660

COMPETITOR DETAILS
 Entrant.....Comp Licence No.....
 Competitor.....Age.....Comp Licence No.....
 Tel home.....Office.....Fax.....
 e-mail address.....Cell No.....
 Address for Correspondence.....

Vehicle Make.....Type/Model.....Year.....
 Engine Make.....Capacity cm³.....No. of Cyls.....

DECLARATION/UNDERTAKING TO BE SIGNED BY EVERY ENTRANT/DRIVER/RIDER:
 I/We have read and understood GCR's 93, 94, 113, 121 and 122 of the MSA Handbook and signify my/our agreement to abide by these Rules by signing this entry form.

Entrant's signature..... Print.....
 Driver/Rider's signature..... Print.....
 Parent/Guardian's signature..... Print.....

WITHDRAWAL OF ENTRY
 I/We hereby wish to withdraw my/our entry from the race to which this entry form applies for the following reasons:.....
 Entrant's signature.....Driver's signature.....
 Date:.....