







ORGANISERS USE ONLY			
Group	Class		
Entry Order	Allocated		
Received	Allocated Comp No		

Dayle ITM Goldrush Rally of Coromandel ENTRY FORM

PLEASE RECORD THIS ENTRY FOR

A: Date of Meeting: 17 August 2019	B: Class Entered: NZ1 Ope	NZ2 NZ3 n 2WD Ope		NZ5B NZ5C			
C: Sponsors:							
D: DRIVERS AND ENTRANT DETAILS							
Please print in block letters	NO 1 DRIVER	NO 2	DRIVER	ENTRANT			
Last Name							
First Names							
Date of Birth							
Physical Address: Street / Town / City							
Postal Address for Event details				Postcode:			
		T					
Telephone Contacts: Home							
Cellphone							
Email address							
Emergency Contact Name							
Emergency Contact Phone							
New Competitor Briefing: If contested less than three rallies attendance is compulsory	Please tick here if you are required to attend the briefing:	Please tick he required to a briefing:	nere if you are attend the				
Competition Licence No							
Licence Grade							
Expiry Date Of Comp. Licence							
Financial Member Of (Name Of Car Club)							
Civil Drivers Licence No							
Currently is your NZ civil drivers licence disqualified?	Y/N	Y	/ N				
If YES, then you must sign a decla	aration at Documentatio	n as per NS	SC 43(2)(b)				
Age Group (Please Circle Applicable Group)	Under 19; 19-25; 26-35; 36-60; 61 Plus	Under 19; 19-25; 26-35; 36-60; 61 Plus					
Foreign Participant on Non-MSNZ Licence	Y/N	Y/N					
E: VEHICLE DETAILS							
Vehicle Make:	Ve		Vehicle Mode	el:			
Engine Capacity (cc's):			Colour of veh	Colour of vehicle:			
Registration No.	Log Book No.						
F: PAST EXPERIENCE TO ASSIST WITH SEEDING							
[Record here brief details of seeding and finish order in last three events entered]							
Event:	Seeded: Finish pos						
Event:	Seeded: Seeded			Finish position:			
LYGIIL.	Seeded		i iiiisii pus	IUOII.			

G: STAGE NOTES							
Stage notes are available at a cost of NZ\$250 per set. For those competitors wishing to purchase Stage Notes you must order direct through Neil Allport Motorsport website www.allports.nz For administration purposes, please indicate if you will be ordering Stage Notes.			se (Circle) YES	(Circle) NO			
H: ENTRY FEES	•			<u> </u>			
ENTRY TYPE			AMOUNT	CLOSING DAT	Έ	TICK	
International Competitors			\$1,490.00	5pm Friday 26th	¹ July		
NZRC Category 1, 2, 3 & 4			\$1,226.00	5pm Friday 26th			
NZRC Category 5			\$1075.00	5pm Friday 26th July			
4WD Others incl Top Half (Non-	NZRC)		\$996.00	5pm Friday 26th July			
2WD Others incl Top Half (Non-			\$946.00	5pm Friday 26th July			
Late Entries - Fee as above + La	,		+ \$100.00	5pm Wed 7 th August			
I: RECONNAISSANCE			+ \$50.00	5pm Friday 26th July			
J: Coverage of the MSNZ Insurance excess of \$3,500 (Clubmans and NZRC5 only)		+ \$50.00	5pm Friday 26 th	¹ July			
Early bird Clubmans discount (Non NZRC - pay before 8th	July)	- \$100.00	5pm Monday 8	th July		
			•	, ,		·	
I have received the Supplementary Regulations and all other regulations or Articles as determined in the Appendices and Schedules of the current New Zealand Motorsport Manual for the event I am entering and agree to be bound by them and by the National Sporting Code of MotorSport New Zealand Inc. In consideration of the acceptance of this entry and of my being permitted to take part in the Meeting or Events detailed, I agree not to pursue claims against and (severally) to hold harmless, indemnify and keep indemnified MotorSport New Zealand Inc, its members, associated or affiliated clubs and entities, rally and/or event organisers and promoters, the inviting club and entity (or entities), race circuit owners, providers and operators, owners and tenants of private property (including land, buildings and/or fixtures, fittings and chattels) traversed, or proximate to events, officials, fellow competitors, and the directors, officers, servants, representatives and agents of those entities (all together "the Indemnified Parties") in relation to all losses, actions, expenses, costs, liabilities, claims and demands in respect of death, injury, loss or damage to persons or property of myself, and/or my team (including drivers, co-drivers, passengers, management and/or mechanics) whatsoever, caused or arising out of or in connection with this entry or taking part in the events to which this entry relates, notwithstanding that such death, injury, loss or damage may have been contributed to or caused by the negligence of any of the Indemnified Parties and/or by any other person. This provision confers a benefit on, and is intended to be enforceable by, each of the Indemnified Parties (in accordance with the Contracts (Privity) Act 1982). 2. Ability to Control a Vehicle Declaration by Driver: I declare that should I at the time of any event this entry form relates to be suffering from any disability of any kind whether permanent or temporary which is likely to detrimentally affect my control of my automobile or my fitne							
 Critical Safety Helmet Head & Neck Restraint Protective Clothing Safety Harness Window Net(s) Roll Bar / Safety Cage Seat(s) and Mounts Fire Extinguisher 	 Non-Critical Safety Engine and Transmission Mounts Flexible Fluid Lines & Hoses Throttle Return (Failsafe) Engine Starter Operation Reverse Gear Operation Exhaust System Oil Catch Tank(s) 	Exterior ApPanels / CDoorsWindows	overs d Demisting n Mirrors	Non Safety Ballast (Se Competitio Registratio LVV / MSN LVV Plate Optional E	n Numbers n & WOF L IZ Authority quipment	abels Card	

- Wheels and Tyres
- Brake System
- Steering & Suspension Systems
- Fuel Tank(s) / Fillers / Lines
- Fuel / Oil / Brake Line Protection
- First Aid Kit / Safety Triangle
- Electrical Wiring
- Ignition / Circuit Breaker
- Battery
- Lighting Systems
- Brake Lights
- Rear Lights
- Cockpit Construction / Fittings

_Signature

- Bulkheads
- Tow Eyes
- Mudflaps
- Tow Rope
- Auxiliary Lights

I acknowledge that where any breach of the Safety Schedule is found during a Safety Audit I will be subject to penalties under the National Sporting Code and my signature below indicates my acceptance of this undertaking.

4 Consent

Name of Card Holder_

I consent to the details contained on this form being held by Rally of New Zealand Ltd, and/or the Inviting Clubs for the purpose of the promotion and benefit of the Rally Event(s) concerned, and Motorsport in general. I acknowledge my right to access and correction of this information. This consent is given in accordance with the Privacy Act 1993.

I also authorise the medical providers of the event to disclose medical information relevant to injury or illness sustained during the above mentioned event to MotorSport NZ and its officials.

Signature of No. 1 Driver:	Date: / /				
Signature of No. 2 Driver:					
POST ENTRY TO: Rally New Zealand, PO Box 62-021, Sylvia Park, Auckland 1644	PLEASE MAKE CHEQUES PAYABLE TO: Rally New Zealand				
DIRECT CREDIT: Rally of New Zealand ASB Bank Ltd 12-3011-0203851-00	TAX INVOICE GST No. 25-256-611				
Visa / Mastercard Details (circle) A fee of 3% will be added to all credit card transactions Card Number					

Expiry Date