



OFFICIAL ENTRY FORM

THE CLASSIC MOTORCYCLE CLUB



P O Box 8830
Edenglen, 1613
TEL : (011) 452-6608
Fax : (011) 452-6609

MIDVAAL – 28th APRIL 2007

Held under the General Competition Rules and Standing Supplementary Regulations of Motorsport-South Africa, and these Supplementary Regulations. **MSA Permit Number: 6921**

RACING NO:		SPONSOR / ENTRANT	
CATEGORY AND CLASS DETAILS			
Please mark appropriate block(s) with an X			
50 cc Highschool	125 Production	Superbikes	Powersport
		600cc Silvercup Class	CLASSICS
			Derbi
			BOTTS
			Historics

Riders Full Name :		Licence No.	
Postal Address:		Telephone No:	
		Code:	Facsimile No:
Work Telephone:		Facsimile:	
Home Telephone:		Cell:	
e-mail Address:			
Emergency Contact Person:		Emergency Telephone No:	
Vehicle Make:		Vehicle Type/Model:	
Name of Registered Club You Belong To :			

DECLARATION/UNDERTAKING TO BE SIGNED BY EVERY ENTRANT/DRIVER:

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: _____ (Print _____) Date: _____
(Signature)

Driver/Rider: _____ (Print _____) Date: _____
(Signature)

Parent/Guardian: _____ (Print _____) Date: _____

(Signature: I being the lawful parent/guardian of the abovementioned competitor do hereby grant permission for him/her to drive/ride in the abovementioned event)

Amount to be Paid

Entry	
2nd Entry	
Transponder	