	• •	2015 National Patios		OFFICIAL USE ONLY			
National 🗚		ACT Khai	ACT Khanacross Series				
PA'	TIÌS	ENTR	Y FORM	(	Class	Car Number	
Events are held under the ISC of the FIA and the NCR's of CAMS.			DATE: 19/7/2015	PERMIT NO: TBA			
EVENT: 2015 ACT Khanacross Series – Round 3			Enclosed Payment for	- ( )			
PROMOTER: Light Car Club of Canberra			DISCLAIMER: EXCLUSION OF LIABILITY, RELEASE AND ASSUMPTION OF RISK - FOR COMPETITORS AND/OR DRIVERS				
COMPETITOR (VEHICLE OWNER)			<b>Competitors:</b> I/We being the competitor/s of the vehicle described on this Entry Form wish to enter that vehicle for the above event.				
Full Name:	<b>Competitors and Drivers:</b> I/We being the competitor/s and/or driver, 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						
Address:							
Suburb: State: Postcode:							
Phone Number	Licence Number		Australian Motor Sport Limited ("CAMS").				
Day:	CAMS:		In exchange for being able to attend or participate in the event (including entering the event), I agree:				
Night:	Civil:		• to release CAMS and Australian Motor Sport Commission Ltd, promoters, sponsor organisations, land owners and lessees,				
Mobile:	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;						
Email:							
DRIVER							
Full Name			<ul> <li>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</li> </ul>				
Address							
Postcode			attend or participate in th I/we acknowledge that:	ne event	at my own risl	k.	
Phone Number	Number Licence Number			• the risks associated with attending or participating in the event include			
Day	CAMS		<ul> <li>the risk that I may suffer harm as a result of:</li> <li>motor vehicles (or parts of them) colliding with other motor</li> </ul>				
Night Civil			<ul> <li>vehicles, persons or property;</li> <li>acts of violence and other harmful acts (whether intentional or</li> </ul>				
Mobile			<ul> <li>accept the conditions of, and acknowledge the risks arising from, attending or participating in the event services by CAMS and the Associated Entities.</li> </ul>				
Email							
COMPETITOR'S SIGNATURE							
							I understand that this disclaimer is not intended to exclude any valid claim I may have under the CAMS Personal Insurance Scheme.
			DATE / /			PARENT/GUARDIAN CONSENT (PERSONS UNDER 18 YEARS OLD)	
DRIVER'S SIGNATURE			I,(Name) of				
DATE / /			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				
CAR CLUB (DRIVER) NUMBER							
DESCRIPTION OF COMPETITION VEHICLE							
PREFERRED NUMBER	MAKE		YEAR MODEL		REGISTER NUMBER	ED	
COLOUR	BODY TYPE		CLASS:		CAPACITY		
			TYPE:			сс	