

## ENTRY FORM



**TVS**  
*Racing*

|  |  |  |  |             |  |  |  |     |  |  |  |                   |  |  |  |
|--|--|--|--|-------------|--|--|--|-----|--|--|--|-------------------|--|--|--|
| <b>MMSC TVS Rider Training School</b>                |  |  |  |             |  |  |  |     |  |  |  | <b>ENTRY FORM</b> |  |  |  |
| <input type="checkbox"/> 28 <sup>th</sup> April 2015 |  |  |  |             |  | <input type="checkbox"/> 18 <sup>th</sup> May 2015 |  |     |  |  |  |                   |  |  |  |
| Riders Name  |  |  |  |             |  |  |  |     |  |  |  | PHOTO             |  |  |  |
| Address  |  |  |  |             |  |  |  |     |  |  |  |                   |  |  |  |
| City   |  |  |  |             |  |  |  | Pin |  |  |  |                   |  |  |  |
| Tel (O)  |  |  |  |             |  | Tel (R)  |  |     |  |  |  |                   |  |  |  |
| Mobile   |  |  |  |             |  | Email  |  |     |  |  |  |                   |  |  |  |
| Civil Lic. No.                                       |  |  |  |             |  | Valid  |  |     |  |  |  |                   |  |  |  |
| Blood Group  |  |  |  | Allergy :   |  |  |  |     |  |  |  |                   |  |  |  |
| DOB  |  |  |  | Occupation: |  |  |  |     |  |  |  |                   |  |  |  |
| In case of emergency contact no:                     |  |  |  |             |  |  |  |     |  |  |  |                   |  |  |  |

**Please submit photocopy of the following (compulsory)**

1. Any photo identity along with signature. In case of minor (below the age of 18) photo identity proof of the parent along with signature also has to be submitted.
2. stamp size photograph of rider.

Entry fee of Rs.3000/- . Can be paid by Demand Draft, Deposited into our bank account or by cash. Cash payment accepted only at MMSC office.

**Bank : HDFC Bank**  
**Branch : Santhome Branch**  
**A/c Name : Madras Motor Sports Club**  
**A/c Type : SB**  
**A/c Number : 50100008894164**  
**IFSC Code : HDFC0000386**

| FOR OFFICE USE ONLY |        |             |
|---------------------|--------|-------------|
| Received on         | Amount | Receipt No. |
|                     |        |             |

**Remarks:**

Please mention the vehicle owned by you (if any) here

**Indemnity**

I/We have read the Regulations issued for this event and agree to be bound by them. In consideration of the acceptance of the entry of this machine, I/We agree to save harmless and keep indemnified the Government of India, the relevant State Governments, the FIM, the FMSCI, the organizers / promoters and their officials, the sponsors, agents, representatives, employees and all persons

assisting them in this event and all owners and tenants and all persons assisting them in this event all actions, claims, costs, expenses and demands in respect of death or injury to myself or any other person or persons or loss or damage to any property including the machine concerned in this event, or otherwise howsoever and notwithstanding that the same may have been contributed to or occasioned by the negligence of the organisers and their officials, agents, representatives, employees and all persons assisting them in this event.

The Indemnity shall be binding on my heirs, executors, administrative and legal representatives. I/We declare that the rider possess the standard of competence necessary for an event of this type to which. This entry relates, also that the machine entered is suitable and road worthy for the event. I/We agree and undertake to abide by the Rules and Regulations framed for this event including the conditions precedent set out therein and all Rules and Regulations which may hereinafter be framed.

I agree and renounce the right to legal proceedings before a civil court.

Finally, I/We hereby acknowledge that I/We are conversant with the risks and dangers of motorsport in general and this event in particular which I/We assume hereby.

Date:

Place:

Signature

**IMPORTANT: Any indemnity and/or declaration as prescribed by the paragraphs above if signed by a person under the age of 18 years, shall be countersigned by that person's parent/guardian, whose full name and address shall be given and also his capacity as signatory.**

Signature of Guardian : \_\_\_\_\_

Full Name : \_\_\_\_\_

Address: \_\_\_\_\_

Signature of Witness to all the above:

Full Name & Address of Witness:

\_\_\_\_\_