

**The CMMC Limited**  
**MONAGHAN MOTOR CLUB**  
**OPEN TEST TRIAL**  
**SUNDAY 15<sup>th</sup> FEBRUARY 2015**  
**HEWISON TROPHY NATIONAL ROUND**

This event will be held under the General Competition Rules of Motorsport Ireland (Incorporating the provisions of the International Sporting Code of the FIA) Appendix 90 of the current MI Yearbook and these supplementary regulations.

<b>Permit No:</b>	<b>15/ 021</b>
<b>C.O.C.</b>	<b>Brendan Flynn</b>
<b>Assistant C.O.C.</b>	<b>Brenda Flynn</b>
<b>M.I.Steward</b>	<b>Patsy McIntyre</b>
<b>Venue</b>	<b>Wrights Quarry, Swanns Cross, Monaghan Approx 7 miles from Monaghan on the Cootehill road</b>
<b>Event Secretary</b>	<b>Cora Maguire</b>
<b>Entry Fee</b>	<b>€55.00 including personal accident Novice €40</b>
<b>Paper Scrutiny</b>	<b>10.30am</b>
<b>Start Time</b>	<b>11.00am</b>
<b>Awards</b>	<b>1<sup>st</sup> Overall + class awards</b>

Classes and regulations as per current Motorsport Ireland year book. Copy displayed at start. Club members will run in a separate class for club championship points. Club class will run between 11.30am and 3pm. Hewison competitors will run between 11am and 4pm.

All cars must conform to Motorsport Ireland regulations.

**PLEASE NOTE ONE DAY LICENCES WILL BE AVAILABLE BUT MUST BE BOOKED WITH THE SECRETARY BEFORE THE EVENT.**

Entries to Event Secretary: Cora Maguire, 14 Cluain Ard, Dernagrew, Monaghan on or before 12<sup>th</sup> February 2015

The CMMC Limited  
COUNTY MONAGHAN MOTOR CLUB

## ENTRY FORM

**AUTOTEST 15th FEBRUARY 2015**

DRIVER \_\_\_\_\_

ADDRESS \_\_\_\_\_

E-mail Address \_\_\_\_\_

CMMC MEMBERSHIP NO. \_\_\_\_\_ COMPETITION LICENCE NO \_\_\_\_\_

CAR \_\_\_\_\_ CAPACITY \_\_\_\_\_

REGISTRATION NUMBER \_\_\_\_\_ CLASS ENTERED \_\_\_\_\_

***INDEMNITIES, DECLARATIONS & UNDERTAKING BY ENTRANTS, DRIVERS AND PASSENGERS***

(a) I have read the supplementary regulations issued for this event and agree to be bound by them and by the General Competition Rules and Regulations of MI including the guidelines and regulations contained in Motorsport Ireland's Code of Conduct for Children's Sport. In consideration of the acceptance of this entry or of my being permitted to take part in this event I agree to save harmless and keep indemnified the CMMC, Co Monaghan Motor Club, Irish Automobile Club Ltd. t/a Royal Irish Automobile Club, Irish Motorsport Federation Ltd. t/a Motorsport Ireland and their respective officials, servants, representatives and agents from and against all actions, claims, costs, expenses and demands in respect of death, injury, loss of or damage to the person or property of myself, my driver(s), passenger(s) or mechanic(s) (as the case may be) howsoever caused arising out of or in connection with this entry or my taking part in this event and notwithstanding that the same may have been contributed to or occasioned by the negligence of the said bodies, their officials, servants, representatives or agents. Furthermore, in respect of any parts of this event on ground where Third Party Insurance is not required by law, this Agreement shall in addition to the parties named above extend to all and any other competitor(s) and their servants and agents and to all actions, claims, costs, expenses and demands in respect of loss of or damage to the person or property of myself, my driver(s), passenger(s) or mechanic(s).

My age is ..... (if applicable, state "over 18 years").

(e) Any indemnity and/or declaration as prescribed by sub-paragraph (a) above which is signed by a person under the age of 18 years shall be countersigned by that person's parent or guardian, whose full names and address shall be given. Furthermore, the parents and/or guardians of persons under 18 years of age shall grant permission to MI and the Irish Sports Council to carry out tests in accordance with the Irish Anti-Doping Rules (Rule No 139) in the following form:  
"I/We hereby grant permission to MI and the Irish Sports Council to carry out tests as set out in Rule No 139 of the GCRs in accordance with the Irish Anti-Doping Rules."

Signature of Driver \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian (if under 18 years of age) \_\_\_\_\_

Address of Parent/Guardian \_\_\_\_\_

**For Office Use Only:**

**Entry Fee Paid:** \_\_\_\_\_