



APPLICATION TO COMPETE

21st – 23rd January 2005

ENTRANT/ OWNER: Name:
Address:
Suburb: State: Postcode:
Telephone: (.....)..... Fax: (.....).....
CAMS Licence No: Civil Licence No:

ENTRANT'S STATEMENT: I/We being the entrants of the vehicle described on this Form wish to enter that vehicle for the above event. I/We certify that the particulars on this form are true and correct in every particular, to the best of my/our knowledge and belief.

ENTRANT'S SIGNATURE: Date:

DRIVER: Surname: Given Name:
Address:
Suburb: State: Postcode:
Telephone: (.....)..... Fax: (.....).....
Mobile: Email:
CAMS License No: Level: (Minimum National Rally)
Shirt Size: XS S M L XL XXL XXXL

CO DRIVER: Surname: Given Name:
Address:
Suburb: State: Postcode:
Telephone: (.....)..... Fax: (.....).....
Mobile: Email:
CAMS License No: Level: (Minimum National Rally)
Shirt Size: XS S M L XL XXL XXXL





VEHICLE: Make: Model: Year: Color: Engine Capacity (cc): Permit / Registration No: Turbo: Yes [] No [] 4 Wheel Drive: Yes [] No [] Preferred Competition Numbers: (4 - 100 ONLY) Modified: Yes [] No []

DISCLAIMER EXCLUSION OF LIABILITY, RELEASE AND ASSUMPTION OF RISK ENTRANTS AND/OR COMPETING CREWS IN RALLIES

For entrants

I/We being the entrant/s of the vehicle described on this Entry Form wish to enter that vehicle for the above event.

For entrants and competing crew

I/We being the entrant/s and/or driver and/or co-driver and/or navigator, 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 Australian Motor Sport Limited ("CAMS"). In exchange for being able to attend or participate in the event (including entering the event), I agree:

- to release CAMS and Australian Motor Sport Commission Ltd, promoters, sponsor organisations, land owners and lessees, 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; 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 attend or participate in the event at my own risk.

I/we acknowledge that:

- the risks associated with attending or participating in the event include the risk that I may suffer harm as a result of: motor vehicles (or parts of them) colliding with other motor vehicles, persons or property; acts of violence and other harmful acts (whether intentional or inadvertent) committed by persons attending or participating in the event; and the failure or unsuitability of facilities (including grand-stands, fences and guard rails) to ensure the safety of persons or property at the event. motor sport is dangerous and that accidents causing harm can and do happen and may happen to me.





- the route instructions should not be relied upon exclusively in estimating the degree of severity of any hazard which might be encountered, or the manner in which any section of the road is driven, whether shown in the route instructions or not, and that I/We have been advised to exercise caution in following these route instructions.

ENTRANT'S SIGNATURE: Date:

DRIVER'S SIGNATURE: Date:

CO-DRIVER'S SIGNATURE: Date:

For persons under the age of 18 years the following parent/guardian consent must be completed.

PARENT/ GUARDIAN CONSENT – PERSONS UNDER 18 YEARS OLD

I of [Address] am the parent/ guardian* of the above-named ("the minor") who is under 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

ACCOMMODATION: Not included.

*The PORSCHE MT BULLER SPRINT has arranged discounted accommodation for the event. Please refer to the **website www.mtbullersprint.com** for contact details and rates.*

Entry includes:

- All competitive stages.
- Welcome Cocktail Party Friday 21st January 2005.
- Presentation Function Sunday 23rd January 2005.
- Confederation of Australian Motorsport (CAMS) Personal Accident Insurance policy and CAMS Combined Liability Insurance policies.
- Commemorative merchandise package including Race Shirt and Cap.





MEDICAL DECLARATION

DRIVER: Surname: ... Given Name: ... Date of Birth: ... Medical Conditions: (eg Asthma): ... Medications: ... Allergies: ...

NEXT OF KIN:

Surname: ... Given Name: ... Address: ... Suburb: ... State: ... Postcode: ... Telephone: ... Fax: ... Mobile: ... Relationship: ...

NAME OF TWO PEOPLE WHO CAN BE CONTACTED IN CASE OF EMERGENCY:

PERSON 1 Surname: ... Given Name: ... Address: ... Suburb: ... State: ... Postcode: ... Telephone: ... Fax: ... Mobile: ... Relationship: ...

PERSON 2 Surname: ... Given Name: ... Address: ... Suburb: ... State: ... Postcode: ... Telephone: ... Fax: ... Mobile: ... Relationship: ...

Where I suffer any injury or sickness during the event, I consent to the release of my personal health information to Health Services by an authorized representative of Mt Buller Sprint who may also use this information in the preparation and release within and outside Australia of accident or incident information and reports to interested parties for the purpose of accident prevention and safety activities, news services including broadcast services, or the processing of insurance claims.

CO-DRIVER'S SIGNATURE: ... Date: ...





MEDICAL DECLARATION

CO DRIVER: Surname: ... Given Name: ... Date of Birth: ... Medical Conditions: (eg Asthma): ... Medications: ... Allergies: ...

NEXT OF KIN:

Surname: ... Given Name: ... Address: ... Suburb: ... State: ... Postcode: ... Telephone: ... Fax: ... Mobile: ... Relationship: ...

NAME OF TWO PEOPLE WHO CAN BE CONTACTED IN CASE OF EMERGENCY:

PERSON 1 Surname: ... Given Name: ... Address: ... Suburb: ... State: ... Postcode: ... Telephone: ... Fax: ... Mobile: ... Relationship: ...

PERSON 2 Surname: ... Given Name: ... Address: ... Suburb: ... State: ... Postcode: ... Telephone: ... Fax: ... Mobile: ... Relationship: ...

Where I suffer any injury or sickness during the event, I consent to the release of my personal health information to Health Services by an authorized representative of Mt Buller Sprint who may also use this information in the preparation and release within and outside Australia of accident or incident information and reports to interested parties for the purpose of accident prevention and safety activities, news services including broadcast services, or the processing of insurance claims.

CO-DRIVER'S SIGNATURE: ... Date: ...





MOTORSPORT EXPERIENCE DECLARATION

Please complete with relevant Motorsport experience. If more space is required please attach further sheets.

DRIVER:

Dotted lines for driver experience declaration

CO-DRIVER:

Dotted lines for co-driver experience declaration





EVENT FEE PAYMENT:

2005 ENTRY FEE - \$1785.00

PLEASE NOTE: Additional CAMS Permit Fee will apply TBA – (2004 fee \$297.00)

OR I / we enclose cheque payment for \$..... (Payable to the MT BULLER SPRINT)
Please charge my credit card \$.....

CREDIT CARD NO:

EXPIRY: AMEX VISA M/C B/C

**Please return your completed
Application to Compete Form \$785.00 deposit to:**

**PORSCHE MT BULLER SPRINT
PO Box 7438
Melbourne, Victoria, 8004.**

**PHONE : 0418 337 955
FAX: (03) 9593 2050
EMAIL: mtbullersprint@bigpond.com**

www.mtbullersprint.com

