## **Thruxton Retro** Saturday June 21st 2025

Motorsport UK Permit No. TBC



Date Rec: This meeting will be held under the National Competition Rules of Motorsport UK (incorporating the provisions of Acknowl: the International Sporting Code of the FIA), the Supplementary Regulations and any written instructions the organising club (BARC) may issue for the event.

Rev-Up:

CSCC

assi

Fee:

DRIVER DETAILS: *Separate form required for EACH car and EACH driver							
Single Driver Two Driver/Two Car Te	eam - *Name	e of team m	ate: (Separate	e form required)			
Name:				DOB (if under 18):			
Address:							
Contact Number: Email:							
MSUK Licence Number and Grade:							
MEDICAL AND NEXT OF KIN DETAILS:							
Please advise of any medical conditions or any medication	n you are taki	ng that the	Chief Medical	Officer should be aware	e of:		
Next of Kin to be notified in the event of a serious acciden	it. (Please ma	ike sure the	y are aware tł	nat their details have bee	en given.)		
Next of Kin Name:		Next of Kin Relationship:					
Next of Kin Email:		Next of Kin Contact No:					
Next of Kin Address: (including Post Code)							
RACE ENTRY: Closing date for entries is 12:00 noon on	Wednesday :	18th June 2	025				
To encourage early entry, all entries received after Sund	lay 8th June 2	2025, will in	cur an additio	nal £30 fee. (This supers	edes the e	event SR's)	
Race Carter Company		Day	Duration		Cost	X to enter	
Midland Classic Restorations Classic K/Hawthorn Jaguar	Challenge	Saturday	30 mins quali	/ 40 mins pit-stop race	£485		
Donation to the CSCC Marshal Fund					£10		
CAR DETAILS: Separate form required for EACH car and	d EACH driver	r. All cars m	ust be register	red for the relevant cate	gory.		
Make and Model:	Allocated Race Number:						
Sponsor name: (if applicable)	ponsor name: (if applicable) Transponder No.						
<b>PAYMENT DETAILS:</b> - Entries will only be accepted if a For your security, if returning this form by email, please pl				n 01225 810655.			
Any entries received after Sunday 8th June 2025, will incur been processed. Please debit my Credit/Debit card: (We re				•	d once pay	ment has	
Full card number:							
Expiry date:	Security co	ode:					
Refunds are payable back to the original source. Entry fees tor notifies the CSCC in writing by email of their withdrawa Monday 9th June up until 12:00 noon on the closing date of be NO REFUNDS OR CREDITS for any withdrawals received tion of those who are on a reserve list. If you need to with provided you immediately notify the CSCC that you are with	al by the end of Wednesda d after the clo draw your er	of the day ay 18th June osing date o ntry and we	on Sunday 8th e, will be refun f 12:00 noon \ have a reserv	n June 2025. Any withdra Ided, less a £25 administ Wednesday 18th June 20 e list, we may offer you	wals recei ration fee. 025, with th a partial or	ved from There will ne excep- full refund,	
SIGNATURE: This confirms you agree with the event Su	pplementary	Regulation	s and authoriz	e payment of the correc	t entry fee		
Driver Signature:			Date Sigr	ned:			

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## You only need to fill out the two sections below if applicable.

<b>DRIVER UNDER 18:</b> Any indemnity and/or declaration as prescribed in the event Supplementary Regulations, if signed by a person under the age of 18 years, must be countersigned by the persons Parent/Guardian, whose full details must be given below.				
Name of Parent/Guardian:	Relationship to Driver:			
Email of Parent/Guardian:	Contact No. of Parent/Guardian:			
Address of Parent/Guardian: (including Post Code)				
Signed by Parent/Guardian:	Date Signed:			

ENTRANT DETAILS: Only applicable of you have a Motorsport UK Teams Entrant Licence				
Entrant Licence Number:				
Representatives Contact Number:				
Representatives Email Address:				
Entrant/Team Address:				
Date Signed:				



