

ENTRY FORM

SAVVA VETERAN AND VINTAGE TOUR

21-25 SEPTEMBER 2019

The **2019 SAVVA NATIONAL FOR VETERAN AND VINTAGE VEHICLES** is promoted by the **THE MODEL T FORD CLUB OF SOUTH AFRICA** P O Box 1749 GEORGE, South Africa 6530.

JURISDICTION : Held under the international Sporting Codes of the Federation Internationale de l'Automobile (FIA) and/or the Federation Internationale Motocycliste (FIM), the General Competition Rules (GCRs) of Motorsport South Africa (MSA), the Standing Supplementary Regulations (VSRs) of the Southern African Veteran and Vintage Association (SAVVA), amended January 2009, and these Supplementary Regulations (SRs).

SAVVA PERMIT NUMBER: S 03/2019

PLEASE COMPLETE THIS FORM IN FULL. PARTIALLY COMPLETED FORMS WILL NOT BE ACCEPTED. THE REQUIRED PROOF OF PAYMENT TO BE ATTACHED

ENTRANT :

Full name and surname :

Address:

_ Postal code :

Phone : (H)

Cell :

E – Mail address

Club :

SAVVA Indemnity No.

Club membership number :

DRIVER : (COMPLETE - IF NOT THE SAME PERSON AS ENTRANT)

Full name and surname :

Gender :

Male

Female

Address:

_ Postal code :

Phone : (H)

Cell :

Club :

SAVVA Indemnity No.

Club membership number :

NAVIGATOR :

Full name and surname :

Gender : Mal Femal
e e

Address:

_ Postal code :

Phone : (H)

Cell :

Club :

SAVVA Indemnity No.

Club membership number :

PASSENGER(S):

Full name and surname :

Address:

_ Postal code :

Phone : (H)

Cell :

Club :

SAVVA Indemnity No.

VEHICLE ENTERED

NAME OF OWNER:

MAKE :

MODEL :

YEAR :

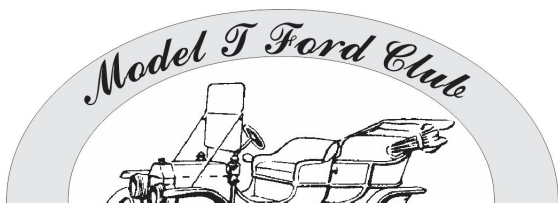
ENGINE CAPACITY :

cc

COUNTRY OF ORIGIN :

REGISTRATION NUMBER :

SAVVA DATING NUMBER:



DECLARATION BY DRIVER

I, (name of driver/rider).....on behalf of all the persons who will travel in or upon the vehicle I will be driving on this event, undertake to ensure that valid indemnity forms, for all accompanying me, have been completed and submitted to the organisers that indemnify Motorsport South Africa, the Southern African Veteran and Vintage Association (SAVVA) and their affiliated clubs, SAVVA Motorsport, all herein referred to as the Regulatory Bodies and any Official, Representative, Promoter, Organiser, Sponsor, Tender, Guarantor organising this event, the owner/owners of any property on or upon which the event is held and any Government, Provincial, Regional Services Board or Municipal Body and their representative agents, against any Legal Liability for any damage or injury that may arise during participation in the event, organised by the Regularity Bodies and persons described herein.

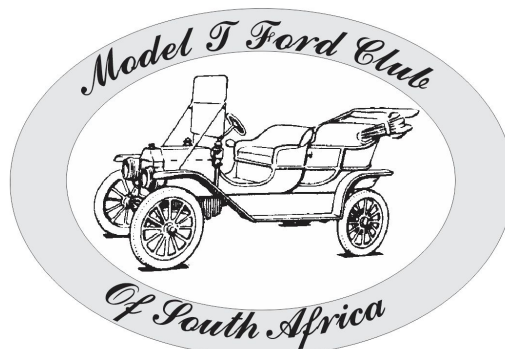
I participate willingly in this event and, should there be any mishap or occurrence giving rise to damage or injury, I take full responsibility. I further declare that I and the persons travelling with me, have been made aware of the risks, dangers and perils attendant upon motorsport activities.

I further declare that the vehicle that has been entered, which I will be driving on the event, is in a roadworthy condition within the limitations of the year of manufacture and is licensed for use on a public road.

I further declare that I am not aware of any known medical reason affecting my ability to take part in this event and that the information given in the documentation submitted is true and correct.

Signature:..... Date:

IF A COMPETITOR OR NAVIGATOR IS UNDER 21 YEARS OF AGE, THIS FORM MUST BE COUNTERSIGNED BY THE APPROPRIATE PARENT OR GAURDIAN ALONGSIDE THE COMPETITORS NAME.



NAME OF DRIVER :

SHIRT SIZE : (Please indicate) S M L XL XXL Other

ACCOMMODATION

Accommodation has been arranged on a dinner, bed and breakfast basis from Saturday evening 21 September 2019 until Wednesday 25 September 2019 after breakfast.

COST : Double room for two people sharing **R 8500.00** (4 nights)

SINGLE ROOM: Price on request

PLEASE INDICATE YOUR REQUIREMENTS:

Couple in double room (mostly double beds)

"Non-couple" who are prepared to share a room.
Please indicate who you will be sharing with :

Persons requiring single accommodation must please contact the organisers and be aware that they will be charged at the single supplement rate of the hotel.

MEALS

NO

YES

Any special dietary requirements ? Please indicate below.

TOUR FEES

Two people sharing : R8500.00 + R 150 (entry fee) = R 8650.00

CLOSING DATE : 31 JULY 2019

BANKING DETAILS

NAME OF ACCOUNT : MODEL T FORD CLUB OF SOUTH AFRICA

STANDARD BANK PORT ELIZABETH

BRANCH CODE : 051001

ACCOUNT NUMBER : 10110852735

REFERENCE : PLEASE USE YOUR NAME AND SURNAME AS REFERENCE

PLEASE E-MAIL PROOF OF PAYMENT TO: paulhoog@absamail.co.za and

SEND COMPLETED ENTRY FORMS TO : philros@telkomsa.net