## Name of event: Royal Enfield Rider Mania 2022 DATE: 18th - 20th Nov 2022 (approved by The Federation of Motor Sports Clubs of India)

## **Entry Form**

Licen	ce No.			Valid up to					Issued at							
		Civil D	riving Li	cen	ce De	tails	3									
Blood Group :		Allergy:														
FMSCI Lic. No	Valid	Valid PAN:									4					
Mobile			_	Email												
Tel (Off)		Tel (Res)							$\downarrow$							
City		Pin								$\dashv$						
City	<del>                                     </del>							+	$\dashv$							
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Address				<u> </u>									+	+	-	
				+						+	+		+	+	$\dashv$	
Rider's Name				$\frac{1}{1}$							+		+	+	1	
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Rider Details (if different from the above)																
Blood Group :	Allergy :															
FMSCI Lic. No			Valid	Valid PAN :												
Mobile	Email													_		
Tel (Off)				Tel (Res)												
City																
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Address																
				1												
Entrant Name							+									
				Τ							1					
Class Entered	Experts Upto 360cc / Experts 361cc to 550cc / Experts Himalayan / Ladies Class Upto 360cc / Ladies Class / Scram 411 / Hunter / Twins / Gen Z Class (18 - 25 Yrs) / Media Class / Race of Champions.							oup								
		pto 360cc / N										,				

Make				Model				Υ	Year of Manufacture						CC					
Registration No.				Engine No.							Cha	assi	s No	<b>)</b> .						
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Name																				
Address																				
City								Pin												
Telephone (Off):					Telephone (Res) :															
Mobile :						Email :														
PIT Mechanic (2)																				
Name										,										
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Address																				
City						•	Pin													
Telephone (Off):						Telephone (Res) :														
Mobile :						Email :														

**Vehicle Details** 

**Please show :** Registration Book, updated Tax Papers, Vehicle Insurance, high risk insurance policy, riding license, FMSCI competition license, blood group report of rider

**Please attach**: Letter of Authority from registered owner of vehicle permitting use of vehicle (NOC) if the vehicle owner is not participating, Three stamp size photographs of rider and pit mechanic, Photocopy of riding license showing validity date.

FOR OFFICE USE ONLY						
Received on	Amount	Receipt No.				

## **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 Government, 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.

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 of the Rider :	
Signature of the Pit Mechanic :	
	ation as prescribed by the paragraphs above if signed by a countersigned by that person's parent/guardian, whose full is capacity as signatory.
Signature of Guardian:	Full Name:
Address:	<del>-</del>
Signature of Witness to all the above	
Signature:	<del> </del>
Full Name & Address of Witness:	
I hereby confirm that as per Article No 8.2 hence organisers are not responsible.	2 – f I have my accident policy with hospitalisation and
Sign of the Entrant	Sign of the Rider