

## Sunday, 10<sup>TH</sup> September 2023

Organisers: York Branch – Veteran & Classic Car Club of WA This form to be completed and returned by email to: entries@yorkmotorshow.com.au OR mailed to PO Box 326, York WA 6302

## **PERSONAL DETAILS:**

Entrants Name:	
Address:	
Email:	
Mobile/phone	
VEHICLE DETAILS:	
Make/Model:	
Year:	Vehicle Registration No:
Comments:	
CILIB DISDIAVS (For those comi	ng as a club display please complete an entry form for each vehicle).

Name of Club:

JUDGING CLASSS (please tick all that you wish to enter):

O Best Commercial (Truck, Trac	tor, Bus, Ute)	O Best Motorbike	O Best Club Display	
O Best Pre 1940's	O Best Post War (19	941-1959)	O Best Classic (1960-1996)	0
Best Modern (1997-now)				

## ASSUMPTION OF RISK AND DECLARATION OF INDEMNITY

I understand that my participation in this event may expose myself, my property, my reserve driver, my passengers, if any, to risk of death, personal injury, loss or damage, which risk may or may not be foreseeable, and I hereby voluntarily assume all such risks as a condition of participation.

In consideration for my being allowed to participate in this event, I further agree to save harmless and keep indemnified the event organisers, promoters and all club members, along with their respective officials, servants, agents and repsresentatives, from and against all actions, claims, costs, expenses and demands of any kind, in respect of death, personal injury, loss or damage to myself, my property, my reserve driver or passengers, however caused, that arise or are alleged to arise out of, or in connection with my entry or participation in this event, except, insofar as such actions, claim, costs, expenses and demands are covered by an Insurance Policy with the State Government Insurance Commission or some other insurance company.

I declare that my vehicle is currently llicensed and roadworthy and that I hold the appropriate drivers licence.

SIGNATURE OF ENTRANT:\_\_\_\_\_

DATE:\_\_\_\_\_