

Tony Verry
Culver House
Harpley
Clifton on Teme
Worcs WR6 6HG
Tel. 01886 853023

July 5th & 6th 2008
VINTAGE MOTORCYCLE ENTRY FORM

Dear Exhibitor

You are invited to submit an entry to the Vintage Motorcycle Section of the 2008 Bromyard Gala. Please complete this entry form and send it to me at the above address before the closing date for entries, which is **April 1st**. **We do not accept any entries on the day** so please get your entry in as soon as you can. **ONLY DATES UP TO 1975 PLEASE!** We will send your entry and camping passes about two weeks prior to the event.

.....CUT ALONG HERE. PLEASE RETURN WITH A STAMPED ADDRESSED ENVELOPE

Make Model.....

Reg. No Year C.c. or h.p.

HISTORY (please write on reverse)

I declare that during the Event my exhibit will be covered by the minimum insurance requirements as required by the Road Traffic Act if my exhibit is not excluded from use on the Public Highway, irrespective of whether it is licensed or not.

If my exhibit is not self propelled it will be covered by a public liability policy having a limit of indemnity of not less than £5,000,000, in any one accident.

I further declare that the driver/rider of any exhibit not excluded from use on the public highway holds a driving licence of the appropriate class for that exhibit.

I agree to produce the insurance and licence documents to the Event Organiser or Safety Officer if requested.

I agree to produce, on request, an Inspection certificate in accordance with the IEE Regulations for any electrical equipment (ie generators, wiring, appliances)

I agree to abide by the Code of Practice of the National Traction Engine Trust and the Society's written Statement of Safety Policy.

I agree to operate my exhibit during the Event and comply with the instructions of stewards.

In the event of a dispute the Event Organiser's decision is final.

My age is (if applicable, state "over 18 years")i

Attendance: SATURDAY / SUNDAY / BOTH DAYS (please indicate)

Tick here if you require a CARAVAN/CAMPING pass

NAME (in capitals).....

Address.....

.....

Post Code Telephone no

SIGNED DATE