

DEVIZES & DISTRICT MOTOR CLUB

DRIVESHAFT 20/20 RALLY 17th OCTOBER 2026 – ENTRY FORM

Please complete this form using typed block capitals and email to: keithandjanet1@btinternet.com

Driver Details			
Name			
Club / Membership No.			
MSUK License No. <i>(RS Clubman Minimum)</i>			
Address			
Postcode:			
Tel. No.		Email	
IN CASE OF EMERGENCY NEXT OF KIN TEL. NO. --			
Signature:			<i>(typed signature accepted)</i>
<i>(+ Parents signature if under 18 yrs):</i>			
Navigator Details			
Name			
Club / Membership No.			
MSUK License No. <i>(RS Clubman Minimum)</i>			
Address			
Postcode:			
Tel. No.		Email	
IN CASE OF EMERGENCY NEXT OF KIN TEL. NO. --			
Signature:			<i>(typed signature accepted)</i>
<i>(+ Parents signature if under 18 yrs):</i>			
<i>Data Protection: Devizes & District Motor Club is the data controller for the purpose of GDPR and the Data Protection Act 2018. The personal data on this entry will be used solely for the administration of this event and to inform you of future events. If you do not wish to be contacted about future events please tick this box []</i>			
Car Details			
Make		Model	Engine cc
Registration No.		Colour	
Class Entered <i>*please delete as appropriate</i>			
<i>*beginner / *novice / *expert</i>			
CMSG Championship contender? <i>*novice / *semi-expert / *expert</i>			
Insurance Details <i>*please delete as appropriate</i>			
<i>*I require insurance for this event</i>		<i>*I have arranged my own insurance</i>	
If using own insurance state name of Provider / Policy No.:			
Entry Fee – Payments by Bank Transfer			
Entry			£40.00
Insurance <i>(if required)</i>			£60.00
Sort Code: 40 44 33 Account No: 81665979 <i>(Use as Ref: 20/20 your surname)</i>	Total	£	
Seeding Information <i>(continue on separate sheet if necessary)</i>			