



South West
Drag Racing Association
(the "Association")



PO Box 1034, ROMA QLD 4455
www.swdra.hwy54.com.au

Ironbark Raceway - 2016 ENTRY FORM

TAYLOR'S PARTS CENTRE / FUCHS OIL TRACK CHAMPIONSHIP

SWDRA FEES		RACE No	PLEASE TICK CLASS (1/8 TH MILE)	
SINGLE MEMBERSHIP	\$25		<input type="checkbox"/>	JUNIOR DRAGSTER (JD) (A/JD) 7.9> (B/JD) 8.5> (C/JD) 11.9>
FAMILY MEMBERSHIP	\$40		<input type="checkbox"/>	MODIFIED BIKE All run (MB)
ENTRY FEE (Incl. 2 Pit Crew)	\$50		<input type="checkbox"/>	STREET 8.70 seconds and slower (ST)
ANDRA DAY LICENCE	\$10	No.	<input type="checkbox"/>	SUPER STREET 7.00 seconds and slower (S/ST)
TOTAL PAID	\$	Receipt signature	<input type="checkbox"/>	SUPER SEDAN Quicker than 7.00 seconds (SS)
NOTES:			<input type="checkbox"/>	MODIFIED Quicker than 7.00 seconds (M)
			<input type="checkbox"/>	OUTLAW 5.99 seconds and quicker. Supercharged, Turbocharged or Nitrous (EMO)

SURNAME: SPONSOR(S):

FIRST NAME:

ADDRESS:

TOWN: POSTCODE:

CONTACT PHONE NUMBER: EMAIL:

VEHICLE: MAKE MODEL: No CYL:

ADDITIONAL INFORMATION: eg best ET; titles won; home track; sell/swap/buy;

SAFETY REQUIREMENTS: All drivers/riders must have a compliant helmet, long sleeve shirts, closed shoes and long pants. Bike Riders must wear leather jacket.

All drivers/riders must have read and understood the safety regulations and signed the relevant indemnity before scrutineering.

CONDITIONS OF ENTRY: In consideration of your acceptance of this application to use the Association's racing facilities, I/we jointly and severally agree to keep INDEMNIFIED and to save harmless, the Association and its respective officers, officials, employees, and representatives and agents or sponsors from and against all actions, claims, costs, expenses and demand in respect of death, injury, loss of or damage to a person or property, of myself/ourselves my/our driver(s) passenger(s) or mechanic(s) (as the case may be) however caused arising out of, or in conjunction with my /our taking part in any meeting, trial or practice session whether official or unofficial and notwithstanding that the same may have been contributed or occasioned by the negligence of the said Association, their officers, officials, employees, and representatives and agents or sponsors.

As a further condition of the acceptance of this application I/we DO HEREBY (as such of us or our executors and administrators) RELEASE the Association, and its members officers, officials, employees, and representatives and agents or sponsors collectively and individually, from all actions, suits, claims and demands for any loss, damage, injury or cost incurred, sustained or made by me and or members arising directly or indirectly out of my/our participation in any capacity whatsoever at any time at a drag racing venue, notwithstanding whether or not any such loss, damage, injury or cost shall have been caused by or contributed to by an act, omission or negligence on the part of the Association, its members, officers, officials, employees representatives of agents or sponsors or in any in the Racing Circuit/ Drag Strip or thereto apparatus appertaining thereto and further I/we DO HEREBY JOINTLY AND SEVERALLY COVENANT to indemnify and keep indemnified the Association and its respective officers, officials, employees, and representatives and agents and sponsors, collectively and individually against all action, claims and demands for any injury, loss, expense, damage or cost suffered sustained or incurred or made by or in any person firm or corporation including the Association or any member, official or employee hereto arising directly or indirectly out of my/our participation in any meeting trial practice of qualifying driving or test whether or not such injury, loss, accident, damage or cost shall have been caused or contributed to by any act omission or negligence or on the part of the Association, its members, officers, officials, employees, representatives or agent or any defect in the racing circuit/drag strip or appurtenances thereto and further I/we DO HEREBY AGREE AND DECLARE that in the interpretation of this clause meaning thereof shall not be restricted by any contained in the preceding clause.

Signed by Competitor Official Witness signature

COMPETITOR DECLARATION - FOR TECH INSPECTED VEHICLES ONLY

SECTION A – COMPETITOR/EVENT DETAILS (please print clearly)

RACE No: _____

NAME	<input type="text"/>	ANDRA LIC NUMBER	<input type="text"/>
CLASS	<input type="text"/>	BRACKET	<input type="text"/>
		LIC TYPE JCL/SSL/UDL/GROUP1)	<input type="text"/>
TRACK	IRONBARK RACEWAY		EVENT DATES
			<input type="text"/>

SECTION B - CATEGORY ONE – SAFETY CRITICAL

<input type="checkbox"/>	Helmet—standard & Expiry	<input type="text"/>	<input type="checkbox"/>	Steering system	<input type="checkbox"/>	Throttle return
<input type="checkbox"/>	Protective clothing		<input type="checkbox"/>	Suspension system	<input type="checkbox"/>	Fire extinguisher
<input type="checkbox"/>	Safety harness(1) Expiry Date	<input type="text"/>	<input type="checkbox"/>	Seat & mountings	<input type="checkbox"/>	Fire system (1)
<input type="checkbox"/>	Roll over protection (1)		<input type="checkbox"/>	Wheels & tyres	<input type="checkbox"/>	Braking system
<input type="checkbox"/>	Bell housing/Auto Trans shield		<input type="checkbox"/>	Lanyard/Ignition	<input type="checkbox"/>	Parachute/s
<input type="checkbox"/>	Fuel shutoff		<input type="checkbox"/>	Technical inspection	<input type="checkbox"/>	Clutch/Chain guard
<input type="checkbox"/>	Supercharger restraints		<input type="checkbox"/>	Cylinder head restraints	<input type="checkbox"/>	Wheelie Bars

CATEGORY TWO – SAFETY NON-CRITICAL

<input type="checkbox"/>	Engine & Transmission	<input type="checkbox"/>	Fuel tank/Cell/Lines	<input type="checkbox"/>	Battery/mounting
<input type="checkbox"/>	Clutch & Flywheel	<input type="checkbox"/>	Liquid overflow	<input type="checkbox"/>	Battery isolation switch
<input type="checkbox"/>	Neutral Safety Switch – Auto Trans (1)	<input type="checkbox"/>	Lower eng cont device (1)	<input type="checkbox"/>	Lubrication system
<input type="checkbox"/>	Wing mounts	<input type="checkbox"/>	Cooling system	<input type="checkbox"/>	Firewall

CATEGORY THREE – CLASS COMPLIANCE AND NON-SAFETY

<input type="checkbox"/>	Engine capacity & components	<input type="checkbox"/>	Supercharger Overdrive /Size /Type
<input type="checkbox"/>	Transmission Type	<input type="checkbox"/>	Electronic Devices
<input type="checkbox"/>	Body dimensions & aerodynamics	<input type="checkbox"/>	General vehicle protection
<input type="checkbox"/>	Fuel blend *	<input type="checkbox"/>	Competition number and Class display

(1) Car only *Please state fuel blend [?] = Item checked [?] = Not Applicable

SECTION C - COMPETITOR STATEMENT

I, the competitor noted in Section A, state that I or my Agent have inspected the entered vehicle against all items ticked in Section B of this form, and confirm that the vehicle complies with all relevant minimum safety and class eligibility requirements of the ANDRA competition Regulations, and that the vehicle will be made available for compliance Audit(s) if requested, and I am aware that where any breach of, or non-compliance with, these regulations is found during a Compliance Audit I render myself liable to the penalties noted in Section 6.2 of the ESP Policy and/or Tribunal Action and my signature below indicates my acceptance of these conditions.

SIGNATURE OF COMPETITOR	<input type="text"/>	DATE	<input type="text"/>
(Official to witness signature) WITNESS	<input type="text"/>	POSITION	<input type="text"/>
NAME (Print)			
WITNESS SIGNATURE	<input type="text"/>	TIME	<input type="text"/>

SOUTH WEST DRAG RACING ASSOCIATION CONTACT INFORMATION

ENTRY FORMS can be submitted:

On the day - print and complete the form and bring it to the event.

Electronically to swdra@hwy54.com.au - MUST be received by midday TWO working days prior to the event.

Post to SWDRA, PO Box 1034, ROMA. Q. 4455 - MUST be received by midday TWO working days prior to the event

ENTRY FEES and **MEMBERSHIP FEES**

Cheques or Money Orders – made payable to SWDRA

Direct Debit to SWDRA Roma BSB 064-428 Account 10067774

MUST INCLUDE YOUR NAME IN THE REFERENCE FIELD TO ENABLE CORRECT ASSIGNMENT OF YOUR PAYMENT.