



2019 IVVCC

Brass Brigade Run



Saturday 24th & Sunday 25th August

OFFICIAL ENTRY FORM

Name of Driver:

Name of Navigator:

Address of Driver:

Landline No.: Mobile No.:

Email:

Please tick ✓ I/We confirm I/We are 18 years of age or older

VEHICLE DETAILS

Make: _____ Model: _____ Year: _____

Registration No: _____ HP/CC: _____ Body Type: _____

Insurance Company: _____ Expiry Date: _____

Name of Club: _____

ACCOMMODATION REQUIREMENT (Please indicate your room preference)

Twin room €255 Double room €255

SUNDAY ONLY ENTRY

Sunday Entry €65

PAYMENT DETAILS

You may enter **ONLINE** at www.ivvcc.ie or by Bank Transfer to:

Allied Irish Bank, Stillorgan **IVVCC Account No.** 33622277
BIC No: AIBKIE2D **IBAN No.** IE80AIBK93357033622277

sending details of your car and accommodation required to Events@ivvcc.ie.

Alternatively, you can make a cheque/payment of €255 made payable to the IVVCC should be sent to: Bernadette Wyer, 80 Pinewood Park, Rathfarnham, Dublin D14, T954, by Friday 9th August, 2019.

IMPORTANT NOTICE FOR THE ATTENTION OF ALL ENTRANTS, PASSENGERS AND ATTENDANTS:

Neither the submission of any vehicle for scrutiny by the Scrutineers duly appointed by the Irish Veteran and Vintage Car Club limited (hereinafter called the Club) nor its subsequent acceptance for the participation in any event in a public place under the direction or control of the Club shall be deemed to be a warranty by the Club or it's duly appointed Scrutineers as to the mechanical condition of the said vehicle or it's suitability to participate in such event, nor shall any liability attach to the Club or the said Scrutineers howsoever arising in connection with the same and the signing by any entrant of this application form shall be deemed to be acknowledgement acceptance of this condition.

Declaration of Insurance I declare that during the whole period of the event my car and any driver thereof will be covered by valid and subsisting insurance as required by the Road Traffic Act 1961. I undertake to produce to the Clerk of the Course, Scrutineer or other duly authorised official of the Club the Certificate of Insurance on demand.

SIGNATURE: _____

GENERAL DATA PROTECTION REGULATION (GDPR)

In the IVVCC we take your privacy seriously and will only use your personal information to administer our events and forward club information to you. From time to time we would like to contact you with details regarding the club. If you consent to us contacting you for this purpose please tick to say how you would like us to contact you.

I agree Preferred contact: Email Text Message Post

We will not pass your information to third parties.