

Car	#
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MSC Racing Association P	re-Race	Inspection	Check List	t and Participant Statement		
Car Owner Name:						
Current Member of MSC	? Yes	No M	lembership	#:		
Member's Current Address:					_	
City/State	/Zip					
Phone: Land:					-	
Type of Car: Coupe Stock					_	
Engine: Make:		_Cylinders: _		CU. IN.:		
Car Driver: Self: Othe						
Car Color:						
This Section to be completed by In	spector	<u>(circle Y or I</u>	<u>v)</u>			
Battery/Electrical:	Y	Ν		Helmet:	Y	Ν
Body:	Y	Ν		Mufflers:	Υ	Ν
Brakes:	Y	Ν		Radiator and Hoses:	Υ	Ν
Doors:	Y	Ν		Roll Cage:	Υ	Ν
Drive Shaft Hoop:	Y	Ν		Seat Belts and Seat:	Υ	Ν
Electric Fuel Pump Shutoff:	Y	Ν		Steering:	Υ	Ν
Fire Extinguisher:	Y	Ν		Suspension:	Υ	Ν
Firesuit/Safety Clothing:	Y	Ν	Th	rottle Pedal and Linkage:	Υ	Ν
Firewall:	Y	Ν		Toe Strap:	Υ	Ν
Fuel Cell and Lines:	Y	Ν		Wheels/Tires:	Ŷ	N
Raceceiver:	Ŷ	N			-	-
				Updated Ja	nuary 1	4, 2018

<u>Car Owner/Driver Statement</u>: By signing this document, I acknowledge that I have read and I fully understand and agree with, this year's version of the MSC Racing Association Pre Race Inspection Guidelines. I understand and acknowledge that vintage racing is inherently a dangerous sport. I hereby release the MSC Racing Association of any and all liability, regarding any damage that may occur to this race car or our equipment during this event. In addition, I hereby release the MSC Racing Association from any and all liability, should I or the car's crew be injured in any way, up to and including the loss of one's life. I accept full responsibility for the safety of the car and equipment and state that I will perform in a safe manner during the event and fully realize that if I don't, I could be asked to discontinue my participation and may be asked to leave the event without refund.

Signature of Participant – Owner	Date
Signature of Participant – Driver	Date
Signature of MSC Racing Association Inspector	Date