



# DRIVER REGISTRATION FORM

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WRITE YOUR COMPETITION NUMBER HERE

## Driver Details:

Driver's Name: .....

Address: .....

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Phone: (Home or Work) ..... Mobile(02.....) .....

Email: .....

Occupation: .....

ORANZ Club: .....

Competition Licence No: ..... Licence Exp Date. .... / .... / .....

Civil Drivers Licence No: ..... Licence Exp Date. .... / .... / .....

Date of Birth: .... / .... / ..... [Please complete DOB if driver under 18 years of age]

Vehicle Class: ..... Engine Type: ..... Capacity in cc: .....

No. of Years Racing: .....

What was First Race: .....

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List Your Sponsors: .....

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Detail racing experience (Required for Commentator - if no details supplied commentator may start inventing your racing history. Please detail races won, lost, years competing): .....

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