

ENTRY FORM

Event: **WAIKERIE AUTO CORSA TARMAC RALLY**
Date: **Sunday, 25 September 2016**

The event will be conducted under the provisions of the Australian Auto Sport Alliance (AASA) National Competition Rules (NCR), AASA occupational health and safety and AASA risk management policies; and all relevant Auto Corsa Group vehicle technical and safety regulations, supplementary regulations and any relevant further regulations and bulletins that may be issued.

CATEGORY: Touring Competition

MAJOR SPONSOR: _____

CREW DETAILS

Entrant name: _____

Entrant address: _____

Entrant email: _____

Entrant phone # 1: _____ Entrant phone # 2: _____

Driver name: _____

Driver address: _____

Driver email: _____

Driver phone # 1: _____ Driver phone # 2: _____

Driver AASA Licence #: _____ Driver civil licence #: _____

Driver DOB: _____

Emergency contact: _____ Emergency contact #: _____

Co-driver name: _____

Co-driver address: _____

Co-driver email: _____

Co-driver phone 1: _____ Co-driver phone 2: _____

Co-driv AASA Licence # _____ Co-driv civil licence #: _____

Co-driver DOB: _____

Emergency contact: _____ Emergency contact #: _____

Navigating only? Y N

VEHICLE DETAILS

Year: _____ Registration #: _____

Make: _____ AASA Passport #: _____

Model: _____ Colour: _____

Actualy capacity: _____ CC No. forward gears: _____

Prefered comp #: _____

History: _____

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AUTO CORSA
EXHILARATION STARTS HERE

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PAYMENT TERMS

MasterCard, VISA and AMEX cards, as well as electronic funds transfer (EFT) are available methods of payment.

A deposit payment of \$395.00 is required to reserve an entry in the competition field, or \$220.00 in the touring field.

The remaining fees (in accordance with the supplementary regulations) fall due on Friday 2 September 2016.

If a credit card is your chosen method of payment, unless otherwise requested, progress payments will be processed on due dates using the credit card details provided for the deposit payment.

Please see www.autocorsa.com.au for full terms and conditions.

CREDIT CARD PAYMENT

Card type: (circle)	MasterCard	VISA	American Express
Card number:			
Name on card:			
Expiry date:			
CCV:			
Amount: (circle)	Deposit Only		Full Fees

ELECTRONIC FUNDS TRANSFER

Account name: Auto Corsa Group Pty Ltd
BSB: 063 133
Account number: 1129 8841
Reference: WAC16 Your surname
Payment date: _____
Invoice name: _____

Please complete pages one and two and return via email to info@autocorsa.com.au

Page three maybe completed at documention verification at the event

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CREW AND CAR Page 3 / 3



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ENTRANT, DRIVER AND CO-DRIVER DISCLAIMER AND DECLARATION

I/We declare that the particulars on this form are true and correct in every particular, to the best of my/our knowledge and belief. You are invited to seek legal advice before signing this document.

"I/We have read and understood the Supplementary Regulations issued for this Meeting and agree to be bound by them and by the National Competition Rules of the Australian Auto-Sport Alliance Pty. Ltd. (AASA)

I/We know that motor sport is dangerous and that accidents causing death, bodily injury, disability and property damage, can, and do happen.

I/We also acknowledge and agree that neither Australian Auto-Sport Alliance Pty. Ltd., nor Auto Corsa, nor the sponsor organizations, nor the land owners or lessees, nor the organizers of the race meeting/event, nor their respective servants, officials, representatives or agents (all of whom shall collectively be called "the Organisers"), shall be under any liability for my death, or any bodily injury, loss or damage which may be sustained or incurred by me, as a result of participation in or being present at the event, except in regard to any rights I may have arising at law.

AUTHORISATION

Entrant name:	_____	Signature: _____	Date: _____
Driver name:	_____	Signature: _____	Date: _____
Co-driver name:	_____	Signature: _____	Date: _____

Note: All spaces must be filled, even if the the entrant/owner is also a driver or co-driver.

PARENT/GUARDIAN CONSENT - PERSONS UNDER 18 YEARS OF AGE

I / we of _____ am the parent / guardian* of the above-named ("the minor") who is under 18 years old. I/we have read this document and understand its contents, including the exclusion of liability and assumption of risk, and have explained the con tents to the minor. I/we consent to the minor attending/ participating in the event at his/her own risk.

PARENT/GUARDIAN AUTHORISATION

Parent/Guardian* name:	_____	Signature: _____	Date: _____
Parent/Guardian* name:	_____	Signature: _____	Date: _____

*Delete whichever does not apply