



# 2019 Competitor Entry Form

Competitor No
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If you have any questions when completing this form, please contact the Challenge Committee at challenge@tlcc.com.au

**Name of Club**

**Team Manager**

**Note: All teams require a non-competing manager who must be available at all times**

**Phone**

 Home

 Mobile

 Email address

**Team Details**

**Driver**

**Navigator**

**Name**

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**Address**


**Driver's Licence**

Number	Expiry date	Number	Expiry date
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**Phone Number**

Home	Mobile	Home	Mobile
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**Email address**

**CCDA Membership**

Number	expiry date	Number	expiry date
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**Competitors, please ensure your registration & insurance papers are up to date & indicate proof of payment.**

*The following information will be used to confirm acceptance in challenge class and could be used in a media release.*

**Class Entering**

Touring       Challenge       Reserve

**Make**

	<b>Model</b>
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**Registration**

Number	Expiry
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**Tyre Size**

Inches	<b>Window Nets are compulsory for all competing vehicles</b>
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**Engine Manufacturer**

	Capacity (cc)
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**Diff Locks**

	Front <input type="checkbox"/> Yes or <input type="checkbox"/> No		Rear <input type="checkbox"/> Yes or <input type="checkbox"/> No
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**Suspension**

	Spring Height <input style="width: 50%;" type="text"/> inches		Body Lift Height <input style="width: 50%;" type="text"/> inches
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**Other Modifications**


**Declarations**

I declare that the above information is true and correct

**Signatures**

Driver	Navigator

I declare that the above named competitors are financial members of the club referred to at the top of this form

**President/Secretary**

Name	Signature