

# SAXMAX

## Championship 2009 - Registration Form

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| Driver Details   |             |                        |  |  |  |  |
|--|-------------|------------------------|--|--|--|--|
| First Name   |             | Home 'phone            |  |  |  |  |
| Surname  |             | Mobile 'phone          |  |  |  |  |
| Address  |             | 750MC Memb No          |  |  |  |  |
|  |             | Transponder No         |  |  |  |  |
|  |             | Date of Birth          |  |  |  |  |
| Email address  |             |                        |  |  |  |  |
| Parent/Guardian Details  |             |                        |  |  |  |  |
| First Name   |             | Home 'phone            |  |  |  |  |
| Surname  |             | Mobile 'phone          |  |  |  |  |
| Address <u>only if different to Driver</u>   |             | Work 'phone            |  |  |  |  |
| Email address  |             |                        |  |  |  |  |
| Car Details  |             |                        |  |  |  |  |
| Year of manufacture  |             | VIN No                 |  |  |  |  |
| Who prepared the car for racing?   |             |                        |  |  |  |  |
| Preferred Racing Number (1 - 20 are reserved for those who finished in those positions last year). 3 digit numbers are not permitted.  |             |                        |  |  |  |  |
| DECLARATIONS: I have read and understood the 2009 Sporting & Technical Regulations and agree to be bound by them and by the General Regulations of the MSA.  |             |                        |  |  |  |  |
| Signed by Driver   |             | Date                   |  |  |  |  |
| Signed by Parent/Guardian  |             | Date                   |  |  |  |  |
| I accept that I may be photographed or videoed at race meetings in connection with my involvement in the SAXMAX Championship and give my permission for such photographs or videos to be taken and published.  |             |                        |  |  |  |  |
| Signed by Driver   |             | Date                   |  |  |  |  |
| I accept that the Driver may be photographed or videoed at race meetings in connection with their involvement in the SAXMAX Championship and give my permission for such photographs or videos to be taken and published.  |             |                        |  |  |  |  |
| Signed by Parent/Guardian  |             | Date                   |  |  |  |  |
| Please complete and return this form with a cheque for £1000 made payable to '750 Motor Club' or with completed Credit/Debit Card details to:-<br>750 Motor Club, Rose Farm, Upper Street, Oakley, Diss, Norfolk. IP21 4AX.  |             |                        |  |  |  |  |
| Credit/Debit Card Details (not AMEX)   |             |                        |  |  |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; height: 20px;"></td> <td style="width: 25%; height: 20px;"></td> <td style="width: 25%; height: 20px;"></td> <td style="width: 25%; height: 20px;"></td> </tr> </table> |             |                        |  |  |  |  |
|  |             |                        |  |  |  |  |
| Switch Issue No  | Expiry Date | Cardholder's Signature |  |  |  |  |