Sport Specials Championship

2018 Registration Form



(as you want it to appear in race programmes etc)

| Name | | Tel - Home | |
|---------------------------------------|--|------------------------------|---|
| Address | | Tel - Work | |
| | | Tel - Mobile | |
| | | MSA Licence Nº | |
| | | Transponder N° | |
| | | Preferred Racing N° | |
| email address | | | |
| | | | |
| | | Car Details | |
| Make/Model/Year of car | | | |
| wake/woder/ rear or car | | | |
| Engine make & model | | | |
| Engine capacity | | | |
| Class entered | | | |
| Engine power at flywheel | | | |
| Weight of vehicle with driv | ver | | |
| ECU Make & Model | | | |
| | | | |
| | | | |
| | | | |
| Sporting & Technical Regular by them. | ulations of the champi | ionship and the club's socia | read and understand the 2018 Il media policy and agree to be bound le 11 of its Memorandum & Articles |
| of Association, to withdra | w membership from a he interests of the Clu | nyone whose conduct is co | onsidered objectionable to other all make the driver ineligible to race |
| Signed: | | Date: | |
| Card Details (not AMEX) | | | |
| | | | |
| Valid from: | Expiry date: | CSV Numbers: | Switch Issue N°: |
| Cardholder's name (exactly | y as shown on the card |) | |

You can either email this form via the 'Submit' button, print and fax it to 01332 811422 or post it, with payment to: 750 Motor Club, Donington Park, Castle Donington, Derbyshire. DE74 2RP

Do you consent to your card being charged with the registration fee of £130.00?