



# 2010 Competitor Application

## A CCDA Sanctioned Event

Competitor No

If you have any questions when completing this form, please contact **Challenge Co-ordinator Tony Price** at challenge@tlcc.com.au or by phone 0419 702 033

**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
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**Team Details**

**Driver**

**Navigator**

**Name**

<input type="text"/>	<input type="text"/>
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**Address**

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

**Driver's Licence**

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

Home	Mobile	Home	Mobile
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**Email**

<input type="text"/>	<input type="text"/>
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**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.*

**Participating as**

**Competing Vehicle**  **Reserve**

**Make**

<input type="text"/>	<b>Model</b> <input type="text"/>
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**Registration**

Number	Expiry
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**Tyre Size**

<input type="text"/> Inches	<b>Window Nets are compulsory for all competing vehicles</b>
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**Engine Manufacturer**

<input type="text"/>	Capacity (cc) <input type="text"/>
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**Diff Locks**

<b>Front</b>	Yes or No	<b>Rear</b>	Yes or No
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**Suspension**

<b>Spring Height</b>	<input type="text"/> inches	<b>Body Lift Height</b>	<input type="text"/> inches
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**Other Modifications**

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

**Declarations**

I declare that the above information is true and correct

**Signatures**

Driver <input type="text"/>	Navigator <input type="text"/>
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I declare that the above named competitors are financial members of this club

**President/Secretary**

Name <input type="text"/>	Signature <input type="text"/>
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