



YOUTH KING OF THE COAST

SATURDAY 20 February 2016

Name _____

Address _____

Email _____

Phone Nos: Home _____ Work _____ Mobile _____

SNZ Licence No _____ Transmitter No _____ No of Crew _____

Racing No _____ Track Code _____ Alternate Racing No _____

Car _____ Motor _____ CC rating _____

Drivers Release THIS HAS TO BE FILLED OUT BY YOUR TRACK

Track..... Releases:.....
(usual contracted track) (comp name)

To compete at: YOUTH KING OF THE COAST - West Coast Speedway @ Greenstone Park

Signed..... (usual track promoter/club)

I wish to enter the above event and by signing this entry form I declare that I understand the format and conditions of entry and agree to abide by them and also indemnify the track, their officials, SNZ officials and staff from all liability in connection with my practice or racing at this meeting.

I agree to allow any details contained on this entry form to be used for promotional purposes **YES NO**

Signed _____ Date _____

Please send entries to
West Coast Speedway, P O Box 419, Greymouth, Fax 03 768 9203
or Email :glenda_mcminn@kinect.co.nz