	PT Trading Club Championship **Autocross Round 2** **ENTRY FORM**	**OFFICIAL USE ONLY** **CLASS** / **CAR #**

CLUB	**Central North Coast Sporting Car Club**
DATE	**Saturday 17th May 2026**
ENTRY FEE	**$ 100**

COMPETITOR (CAR OWNER)	**DRIVER**
Name **Address** **Date of Birth**	**Name** **Address** **Date of Birth**
Phone **Mobile** **Email**	**Phone** **Mobile** **Email**
MA Licence # **Club** **Member #**	**MA Licence #** **Club** **Member #**
Emergency Contact & Number	**Emergency Contact & Number**

DESCRIPTION OF CAR								
Make	**Model**	**Year**	**Colour**	**Body Type**	**Capacity**	**2wd/4wd**	**Turbo**	**Class**