RALLY SPRINT 4 ALL

ENTRY FORM

MEDICAL AID MEMBERSHIP NUMBER MANUFACTURER: TYPE MODEL ie Corolla CAPACITY in cc DRIVE: 4X4 / FWD / RWD EVERY ENTRANT / DRIVER / CO-DRIVER SHALL SIGN THE DECLARATION / UNDERTAKING SET FORTH HEREUNDER. WE HEREBY CERTIFY THAT WE HAVE READ AND UNDERSTAND THE GENERAL COMPETITION RULES AND INDEMNITY. WE FURTHER CERTIFY THAT THE PARTICULARS ARE TRUE AND CORRECT AND THAT THE VEHICLE ENTERED COMPLIES WITH THE REGULATIONS AND VEHICLE SPECIFICATIONS FOR THE PARTICULAR FORMULA / CLASS ENTERED. DRIVER NAVIGATOR SIGNATURES		<u>LITTE FORM</u>	<u>"</u>
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R450,00

Entry Fee