NOOSA COUNTRY SHOW

CLASSIC CAR REGISTRATION FORM

ENTRANT DETAIL	'S:								
NAME:			OWNER / DRIVER						
			(Circle as appropriate)				e)		
ADDRESS:			PHONE	:					
			MOBILI	E:					
			EMAIL:						
VEHICLE DETAILS	S:								
MAKE/MODEL:			T			REGO:			
COLOUR		YEAR:			NO. OF CYLINDERS:				
CL ACCEC ENTERDE	D								
STREET B&S		FEMALE			EEDAI			ORIGINAL	
				:4:	FERAL	тот			
	EE: \$10 for the first C				ai Class	TOT	AL	\$	
Payment by Cnequ	e only to PO Box 26	o, Pomona	QLD 450	08					
by the Rules and By-L AGREE to allow the heir committee and to Please tick as applicable).		e special ru ne above inf taken durin	les of this formation ng the cou	Con with rse o	npetition. sponsors, i of the event	nanag for pr	emen omot	t of the event ar	
	ele entered above)ted if the driver is <u>not</u> the own				DAT	E:	•••••		
FULL NAME OF DR	IVER: (Driver if not owner	of vehicle)		• • • • •			• • • • • •		
SIGNED:					DA	ГЕ:	••••	• • • • • • • • • • • • • • • • • • • •	