

**P.K Memorial 2009 Entry Form****BLOCK CAPITALS THROUGHOUT PLEASE**All correspondence to Driver / Navigator Please Delete**DRIVER**

NAME.....

Address.....

.....

.....

Club.....

Comp. License No. ....

Tel. No. ....

Email ..... @.....

**NAVIGATOR**

NAME.....

Address.....

.....

.....

Club.....

Comp. License No. ....

Tel. No. ....

Email ..... @.....

**VEHICLE DETAILS**

Make .....

Capacity .....

Class .....

Model .....

Reg. No. ....

Colour .....

**CHAMPIONSHIPS**

Driver ANWCC Y/N Reg No.....

Nav. ANWCC Y/N Reg No.....

Driver WAMC Y/N Reg No.....

Nav. WAMC Y/N Reg No.....

Driver AWMMC Y/N Reg No.....

Nav. AWMMC Y/N Reg No.....

Driver WBCC Y/N Reg No.....

Nav. WBCC Y/N Reg No.....

Driver TVMC Y/N Reg No.....

Nav. TVMC Y/N Reg No.....

**INSURANCE***Own Insurance / Event Insurance Please delete***SEE SEPARATE FORM FOR DETAILS**

If arranging your own Insurance Cover, Please give details

Name of Insurance Company .....

Address .....Policy/Cover Note No.....

**If a competitor arranges his own third party cover, he/she will be required to supply the policy number and the name and address of his/hers insurers on the entry form. He must also supply proof of cover at signing on.**

**Please complete this entry form giving all details required as well as signing the declaration. It should be returned with the correct remittance to the Entries Secretary: -**

**Mr. Geraint Richards,****Annedd Wen, Maes y Gerddi, Llandrillo, Sir Ddinbych, LL21 0TH**

Your details will be stored on a computer to generate entry lists and labels for mailing purposes and will only be used with regard to this event. If you object tick this box

