

CHELTENHAM MOTOR CLUB
Pete Singfield 12 Car Nav-Ex Series 2015/2016
ENTRY FORM

Event Date Please (circle/highlight date):
16 October | 27 November | 22 January | 19 February | 18 March

DRIVER

Name: _____

Address: _____

Tel No: _____

Email: _____

NAVIGATOR

Name: _____

Address: _____

Tel No: _____

Email: _____

CAR

Make: _____ Model: _____ Reg No: _____

Class: _____ Insurance Required: _____

Monies

Entry Fee £0.00

Insurance (if required) £15.00

Amount Enclosed £

Insurance is available for all those whose own car insurance does not cover them for this type of event

Next of Kin(Name/Address/Tel No)

Driver: _____

Navigator: _____

Entries should be sent to the Secretary of the Meeting:- See Appendix 1
Or to 12 Car Series.
c/o Cheltenham Motor Club, Upper Park Street, Cheltenham. GL52 6SA.