

**AUSTRALIAN AUTO-SPORT ALLIANCE PTY.LTD
NATIONAL RALLY LICENCE APPLICATION**



SURNAME: _____ CHRISTIAN NAMES: _____

ADDRESS: _____

Postcode: _____

DATE OF BIRTH: _____ AUSTRALIAN CITIZENSHIP YES NO

If No, Nationality on Passport: _____

TELEPHONE: Home: _____ Work: _____

Mobile: _____ Email: _____

Emergency contact: Name: _____ Telephone: _____

Have you competed in a motor racing event in the last 12 months? YES NO

If yes, name of last event competed in _____ Date: _____

To obtain your Australian Auto-Sport Alliance National Rally Licence the attached Medical Declaration is to be completed by yourself returned with this application.

Current CAMS Licence Holders please provide proof of CAMS Licence. Please supply details of competition history for the past 12 months.

(attach additional listing if necessary)

For those people who have previously only held a Club level licence must attach a history of at least three (3) events where the Clerk of Course has provided proof of completion of a satisfactory level of competition.

LICENCE FEE SCHEDULE

Please circle the licence required

NATIONAL RALLY LICENCE \$220.00

and forward with your payment to; AASA, P O Box 249, Benalla. Vic. 3671

PAYMENT DETAILS

Cheque payable to **Winton Motor Raceway Pty. Ltd.** enclosed for \$.....
or charge that amount to my

Visa MC Expiry/.....

Signature _____

Office Use Only:

Date MER received _____ Licence No: _____ Date mailed: _____

Receipt No. _____ Entered dBase: _____ Renewal Due: _____