



CAMS VICTORIAN SPEED EVENTS ADVISORY PANEL

APPLICATION FOR REGISTRATION OF A PERMANENT COMPETITION NUMBER FOR THE 2016 VICTORIAN SUPERSPRINT CHAMPIONSHIP

The **Victorian Speed Events Advisory Panel** is again implementing the registration of permanent competition numbers for those competitors intending to enter for the 2016 CAMS Victorian SuperSprint Championship.

It is important that an email address be supplied as that will be our preferred method of contact for Championship updates.

The following conditions will apply: -

- Registration is not compulsory.
- This registered number is only applicable to the rounds of the 2016 CAMS SuperSprint Championship.
- Registration will apply for the calendar year only.
- Dual entered vehicles will require a separate registration for each entrant.
- Preference for numbers will be given in order of receipt of applications.
- Competition number "1" will be allocated by the Victorian Speed Events Advisory Panel
- All promoters of the VSSC events will be advised of all registered numbers.

The Panel Chairman, Victorian Speed Events Advisory Panel, 18 Grandview Grove , Oakleigh, 3166.

OR Fill in Online and/or Save it to Computer (Needs Acrobat Reader)and Email info@vssc.com.au

Confirmation of receipt of your application and the number allocated will be advised.

Please supply three preferences, (**not the same number 3 times**) as your first preference may have already been allocated.

First _____ **Second** _____ **Third** _____

NAME OF APPLICANT: _____

ADDRESS: _____

STATE: _____ **POSTCODE:** _____

EMAIL: _____

PHONE (h) : _____ **Mob.** _____

VEHICLE DETAILS

MAKE	MODEL	CAPACITY	PLEASE TICK
			Naturally Aspirated <input type="checkbox"/>
(as per Supersprint Technical Regulations) Category			Turbocharged <input type="checkbox"/>
A)Road Registered <input type="checkbox"/>	B)Improved Production <input type="checkbox"/>	C)Sports Sedans <input type="checkbox"/>	Supercharged <input type="checkbox"/>
D)Production Sports <input type="checkbox"/>	E)Sports Racers <input type="checkbox"/>	F)Clubman <input type="checkbox"/>	Rotary Type <input type="checkbox"/>
G)Historic <input type="checkbox"/>	H) Formula Libre <input type="checkbox"/>	J)Non Log Booked <input type="checkbox"/>	
Class 1) <input type="checkbox"/>	2) <input type="checkbox"/>	3) <input type="checkbox"/>	4) <input type="checkbox"/>

LIST ALL MODIFICATION: (If insufficient space please attach a second sheet of paper)

Signature of Applicant _____ Date _____

(PLEASE ENSURE YOU SUPPLY ALL INFORMATION REQUESTED AND PRINT CLEARLY