2020 HYUNDAI COUPE CUP

REGISTRATION FORM	
Please complete in capital letters	
NAME OF DRIVER:	
ADDRESS:	
	POSTCODE:
	(EVE):
E MAIL ADDRESS:	
AGE:	DATE OF BIRTH:
NATIONALITY:	
COMPETITION LICENCE No:	GRADE:
BARC MEMBERSHIP No:	(Mandatory)
NAME OF ENTRANT:	
ENTRANT LICENCE No:	GRADE:
ADDRESS:(If different from above)	
(If different from above)	
	POSTCODE:
TEL (DAY):	
ALL CORRESPONDENCE SHOULD BE SENT TO:	<u>_</u>
CAR: MODEL:	CC:
POWER: WEIGHT:	
PREFERRED COMPETITION NUMBER:	

PLEASE COMPLETE REVERSE OF FORM

NEXT OF KIN NAME:	
NEXT OF KIN RELATIONSHIP:	
NEXT OF KIN PHONE NUMBER:	
SIGNATURE OF ENTRANT:(If different from Driver)	
SIGNATURE OF DRIVER:	
SIGNATURE OF ENTRANT:(If different from Driver)	
SIGNATURE OF DRIVER:	
Payment is £150.00 for the 2020 Season:	
wish to make payment for my registration by the following payment method: (Please choose one from the following)	
 Cheque: (Cheques are to be made payable to "BARC LTD") Credit/Debit Card: (If paying by card, please select from the payment options below) 	
Card Payment Details: (If paying by card only, please choose one from the following)	
Card Type: Credit Debit Card #	
Start Date: / Expiry Date: /	
Security Code: (Last 3 digits on Signature Strip)	
Name on Card: Card Holders Signature:	_
TO BE COMPLETED BY ALL APPLICANTS:	
wish to register for the 2020 HYUNDAI COUPE CUP and I declare that the information given above is correct. I understand that should the above information change in any way I will confirm details in writing to the BARC as detailed below.	
SIGNED: DATE:	

ONCE FULLY COMPLETED THIS FORM SHOULD BE RETURNED TO:

EMAIL: dwheadon@barc.net

Post: British Automobile Racing Club, Thruxton Circuit, Andover, Hampshire SP11 8PN.

PRIOR TO THE FIRST CLOSING DATE OF THE FIRST RACE ENTERED