



## REGISTRATION FORM

I wish to register with NZ Historic Muscle & Saloon Cars Inc.

**Full Name of applicant/driver:**

**Postal Address:**

**Telephone, Home:**

**Work:**

**Mobile:**

**Email Address:**

<b>Age:</b>	<b>Male</b>	<b>Female</b>
<b>Under 19</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>19 – 25</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>26 – 35</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>36 - 60</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>61+</b>	<input type="checkbox"/>	<input type="checkbox"/>
	please tick box	

**Details of race car/s that will be competing in NZ Historic Muscle & Saloon Car Events**

(each car will need approval)

Year.	Make & Model.	COD Number.	Colour.	Class.
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**Photo of car/s to be attached.**

I have read and understand my obligations completely to **abide by**, the rules, **Health & Safety Guidelines and policies** and Motorsport New Zealand Incorporated (**MSNZ**) manual including the national sporting code of MSNZ and the Rules of NZ Historic Muscle & Saloon Cars Inc. (NZHM&SC Inc.) and further agree to abide by such **and amendments** at all times and in perpetuity **whilst in membership with MSNZ and/or NZHM&SC Inc.**

<https://www.motorsport.org.nz/resources/motorsport-manual>

<https://www.motorsport.org.nz/content/national-sporting-code>

<http://www.historicmusclecars.co.nz/home.htm>

I further acknowledge that I know of no impediment that may affect my ability to participate in Motorsport actively and agree to comply with all MSNZ medical obligations both current and in perpetuity.

I will also agree to abide completely to the rules and **Health & Safety obligations** of any, Event organiser and or Circuit owner and or the administrators of such. NZ Historic Muscle & Saloon Cars Inc. will also be recognised and acknowledged and pertaining to this agreement. **I also agree to NZHM&SC Inc. sharing of your personal information in accordance with the Privacy Act 1993 with regard to matters of motorsport activity.**

**Full Name:**

**Date:**

**Signature:**

A registration fee of \$80.00 will be invoiced after acceptance.

Please send to: **NZ Historic Muscle & Saloon Cars Inc.**  
**Email: Sean McCaughan: [Sean@siteworx.co.nz](mailto:Sean@siteworx.co.nz)**