

**SPEEDWAY SEDANS AUSTRALIA
AUSTRALIAN MODIFIED SEDAN TITLE**

Mildura Speedway, VIC
ON 5th 6th and 8th April 2012



ASCF SPEEDWAY SEDANS
AUSTRALIA INC.
ABN 14 329 758 680

NOMINATION FORM

* ALL AREAS MUST BE COMPLETED OR YOUR NOMINATION FORM WILL BE CONSIDERED INCOMPLETE AND WILL BE RETURNED TO YOU. AS A RESULT YOU MAY FACE A LATE NOMINATION FEE!

COMPETITOR DETAILS

REGISTERED CLUB: _____ REGISTERED CAR NUMBER: _____

DRIVER'S SURNAME: _____ Given Name: _____ Middle Name: _____

DRIVER ADDRESS: _____

TOWN: _____ State: _____ Post Code: _____

VEHICLE REGISTERED ADDRESS IF DIFFERENT FROM ABOVE: _____

EMAIL ADDRESS: _____

PHONE HM _____ FAX _____ MOBILE _____

ASCF/SSA INC INFRINGEMENT CARD NO _____ ASCF INC LOG BOOK NO _____ NASR LICENCE NO _____

CAR DETAILS

MAKE OF CAR _____ MODEL OF CAR _____ YEAR _____

SPONSOR NO 1 _____ SPONSOR NO 2 _____

LAST RACE MEETING WHERE I COMPETED - TRACK: _____ **DATE:** _____

DO YOU HOLD A CURRENT NATIONAL OR STATE TITLE? (details) _____

PIT CREW NAMES _____

By signing this nomination I understand that the nominated driver and his/her pit crew may appear in visual media (i.e. photographs, video footage) that is undertaken inside this speedway complex and that it remains the property of the media personnel involved. I also agree to any visual media involving the nominated driver and his/her pit crew to be used by the associated media personal and/or the Speedway Sedans Australia Inc.

Also the undersigned Driver and/or Car Owner hereby declare that I/we have read and fully understand the Information Sheet and Conditions of Entry and will abide by the SSA Rules and Regulations and the SSA Specifications for the Modified Sedan Class, all circulated amendments of those Rules & Regulations and Specifications.

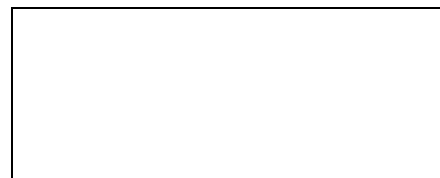
CAR OWNER NAME: _____ SIGNATURE: _____ DATE: _____

DRIVER NAME: _____ SIGNATURE: _____ DATE: _____

This is to certify that the above Car Owner and Driver are holders of a current ASCF/SSA/NASR Inc Licence, current ASCF/SSA Inc. Infringement Card and a current ASCF/SSA Inc. Log Book and that they are Members of the above registered Club and have no outstanding fines or penalties.

STATE SECRETARY: _____ SIGNATURE: _____ DATE _____

This Nomination Form to be returned to: **State Address Stamp**



*** PLEASE COMPLETE PAYMENT SHEET OVER THE PAGE ***

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PAYMENT SHEET

Enclosed is my:

Please
Tick

	Amount	✓	\$
Nomination Fee (Includes Transponder Admin Fee) OR Late Nomination Fee (if applicable)	\$175		
Transponder Hire Fee (if required) (\$20 will be refunded with tow/bonus money etc.)	\$40.00		
TOTAL AMOUNT (all cheques to be made payable to SSA Inc.)			

(Note: All amounts are inclusive of GST)

IF YOU ARE NOT PAYING TRANSPONDER HIRE YOU MUST PROVIDE YOUR OWN TRANSPONDER NUMBER OR YOUR NOMINATION IS NOT COMPLETE AND WILL BE RETURNED!! **TRANSPONDER #:** _____

1. GST OPTIONS

Registered for GST

Registered Business Name.....ABN No.....

Not Registered for GST (please tick box to confirm below statement)

Under the PAYG legislation and guidelines produced by the ATO, I provide you with this statement that, for the supply I am making and further supplies of this type that I make you: This supply is made to you in my capacity as an individual and the supply is made in the course of an activity that is a private recreational pursuit or hobby. **Important Note: Failure to comply with GST legislation will result in the withholding of 48.5% of all prize money.*

Please print name and sign to confirm GST Options chosen

Print Name.....**Signature to confirm GST Option**.....

2. Electronic Banking

Do you wish to have any tow or bonus money owing, paid directly to your nominated bank account electronically?

YES - Please complete Bank Account details below. **(Strongly Recommended)**

NO - Payment will be made by cheque and may take longer to process.

WHO IS THE PAYMENT TO BE PAID TO:

Name of Person: _____ Contact No: _____
(This must be completed otherwise no money will be paid!)

Email or Fax No for Remittance Advice to be sent to: _____

Name of Financial Institution	_____
Account Name	_____
BSB No. 6 digits	_____
Account No. Max 9 Digits	_____

NOTE: If the SSA is still waiting on any paperwork from the competitor after the event, any money owing to you will be held for no longer than 60 days at which point it will be forfeited.

SPEEDWAY SEDANS AUSTRALIA COMPETITOR PROFILE FORM

PERSONAL INFORMATION

NAME: _____ AGE: _____

SUBURB/TOWN: _____ OCCUPATION: _____

FAMILY: _____

CLUB: _____ NICKNAME: _____

CAR INFORMATION:

DIVISION: _____ CAR NO: _____ YEAR: _____

CAR MAKE: _____ MODEL: _____ ENGINE: _____

COLOURS: _____

SPONSORS: _____

PIT CREW: _____

RACING CAREER:

NO. YEARS RACING: _____

CAREER HIGHLIGHTS: (e.g. Championships, Club & State, Major Event Wins, Awards etc.)

TRIVIA:

FIRST CAR RACED – WHEN & WHERE: _____

MOST EMBARRASSING MOMENT IN RACING CAREER: _____

AMBITION: _____

MOST ADMIRER COMPETITORS: _____

FAVOURITE FOOD & DRINK: _____

FAVOURITE TV SHOW: _____

FAVOURITE TRACK: _____

OTHER HOBBIES: _____

IF I WON LOTTO I WOULD: _____

IF I WASN'T INVOLVED IN SPEEDWAY I WOULD
