



**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)

|              |                          |                    |                |               |
|--------------|--------------------------|--------------------|----------------|---------------|
| <b>Year.</b> | <b>Make &amp; Model.</b> | <b>COD Number.</b> | <b>Colour.</b> | <b>Class.</b> |
|--------------|--------------------------|--------------------|----------------|---------------|

**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 . 6 Queen Street, Feilding 4702**  
**Email Secretary : [bruced105@gmail.com](mailto:bruced105@gmail.com)**