


ENTRY and SCRUTINEERING FORM

Event Name		Event Date	Event Fee
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SUPERKART CLUB WA INC Home of long track racing 	SURNAME			
	LICENCE NUMBER		EXPIRY DATE	
	KART NUMBER		Insert P if provisional	
	TRANSPONDER NUMBER			
	CLASS			

ENTRANT DETAILS

First name		Surname			
Address					
Phone contacts				Tick if under 18 yrs	
Emergency contact name		phone			

MEDICAL INFORMATION

(Optional) Provide the first aid with a list of prescribed medication for reference in case of an emergency.

PITCREW DETAILS

Name 1		phone		
address				

KART DETAILS

Chassis Make	Engine Make / Model	Capacity	Qty
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SAFETY CHECKS

Tick Box

Helmet , Visor , Gloves		Battery and weights secure	
Brake components secure/ retained		Fuel and coolant lines secure	
Throttle return springs operating (min 2)		Exhaust secure / retained	

SIGNATURE

if over 18yrs	Date	
parent or Guardian	Date	

OFFICE USE

Name of official Accepting Entry		Entry fee	\$
and Signature	Date	Cash	
		Cheque	