

Rally Whitsundays Officials Registration Form

Please complete the below return to Event Secretary

Christian Name:

Surname:

Street Address:

Suburb:

Town/City:

Post Code:

State:

Mobile Number:

Email Address:

Are you a licenced CAMS official? YES

NO

CAMS licence number:

CAMS licence expiry:

Emergency Contact Person Name:

Emergency Contact Person Phone Number:

Availability:

Role (please indicate your preference)

SOS (Radio Supplied)

Road Closure (Radio Supplied)

Stage Team

Type of vehicle you will be attending the event in?

4WD

Ute

Please sign below: