



2016 ASBK Winton Tyre Test

Send to: Motorcycling Australia

roadrace@ma.org.au; PO Box 134 South Melbourne Vic 3205; fax: 03 9684 0555

Tuesday 15th March 2016

Winton Motor Raceway

Please return entry form with payment by 1st March to secure a place at the 2016 ASBK Official Winton Tyre Test.

Entry Form

Rider Details:

First Name: _____ Surname: _____

MA Licence Number: _____ Expiry Date: _____ Grade: _____

Date of Birth: _____

Address: _____ City/town: _____

State: _____ Postcode: _____ Phone: _____ Mobile: _____

E-mail (compulsory - for all correspondence): _____

Contact for Entry: _____ Phone: _____ Mobile: _____

Next of Kin: _____ Next of Kin Phone: _____ Next of Kin Relationship: _____

Machine Details:

Class: _____

1st Bike Make/Model: _____ Capacity: _____ VIN No: _____

2nd Bike Make/Model: _____ Capacity: _____ VIN No: _____

Tick (✓) the classes of machine you wish to take part with (note: only ASBK-eligible machines are permitted at this event):

Classes	Select all applicable
Superbike	
Supersport	
Moto3/125GP	
Up to 300 Production	
Over 300 Production	

Payment information - \$150 per participant

CREDIT CARD	CARD TYPE: MASTERCARD / VISA																
CARD NUMBER:	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																
EXPIRY: /	CARDHOLDER NAME: SIGNATURE:																

Entry Declaration

I/We the undersigned state that I/We are entering the above selected event/s and that the information supplied is true and correct. I agree to abide by the Series Supplementary Regulations, GCRs, Final instructions and all other relevant rules that are applied during the series. Where rider is under 18 years of age Parent/Guardian signature is required.

Rider's Name (Print): _____ Signature: _____ Date: _____

Parent/Guardian: _____ Signature: _____ Date: _____