

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:						Surnan	ne:										
MA Licence Number:																	
Date of Birth:																	
Address:								wn.									
State:																	
State		Jue		_ =	JIIE				1V	iobile.							
E-mail (compulsory -	for all correspo	ndence): _															
Contact for Entry:						Phone:				Mobile:							
								Next of Kin Relationship:									
1st Bike Make/Model: _ 2nd Bike Make/Model: _ Tick (*) the classes of					Capac	ity:			VII	N No:_							
	Г	Classes					Select all applicable										
	-	Superbike				Ocicot an applicable											
	-	Supersport Moto3/125GP															
	_	Up to 300 Production															
	Ĺ	Over 300 Production															
Payment information		=															
CREDIT CARD						CAF				RD TYPE: MASTERCAF				RD / VISA			
CARD NUMBER:																	
EXPIRY: /	CARDHOLDER	NAME:	•				SIG	NATUR	RE:			•		•			
Entry Declaration I/We the undersigned state that GCRs, Final instructions and all														entary Regulat			
Rider's Name (Print):		Sig				nature:					_ Date	:					