



# REGISTRATION FORM

## BRSCC OSS Championship 2012

**Please Complete and return to:**

Alan Jenkins, Championship Co-ordinator, 63 Greenwood, Beaufort Road, Newport,  
NP19 7NR [alan.jenkins1@ntlworld.com](mailto:alan.jenkins1@ntlworld.com) 07753 617087 01633 663920

Together with the Registration fee of £125

Name.....

Address.....

.....

.....

Post Code.....

Phone No..... Mobile No.....

E mail address.....

Car..... Engine.....

Cubic Capacity..... Forced Induction YES / NO

Class..... Transponder No.....

Preferred Race Number.....

( Please note Race numbers will be allocated on a first come first served basis as registrations are received so please give alternatives to your main choice).

BRSCC Membership No..... Expiry date.....

Acceptance of registration to the BRSCC OSS Championship is provisional upon individual examination of your vehicle for compliance with the current Technical Regulations. Any drivers found to be in breach of these regulations may have their registration suspended.

I enclose the registration fee of £125 per driver made payable to OSS Championship.

Single registration for double header events is available at £20.00 per race

I hereby agree to be bound by the rules of the BRSCC OSS Championship. I confirm that I have read the technical requirements of the regulations and that my car complies with those requirements in respect of the class and category I have entered.

By signing the 2012 Registration Form, I hereby agree to rounds of the Championship being substituted in the event of a cancellation”

Signed:

Date:

Driver





## REGISTRATION FORM PAYMENT SECTION

### BRSCC OSS Championship 2012

- I enclose a cheque made payable to the OSS Championship for £ ..... as payment for the above Championship as indicated.
- I wish to pay via credit card. Please debit the sum of £ ..... From my

|   |                                      |
|---|--------------------------------------|
| <b>Card No.</b> .....                       | <b>Expiry Date</b> .....             |
| <b>CV (3 digits on reverse strip)</b> ..... | <b>Issue No.</b> ..... (Switch only) |

- VISA/MASTERCARD/SWITCH (Delete as appropriate)

NAME

.....

ADDRESS

.....

.....

POST CODE .....

TEL ..... MOBILE .....

EMAIL .....

Please send or email this form together with either a cheque or your credit card details to.....

**Alan Jenkins** 63 Greenwood, Beaufort Road, Newport, NP19 7NR  
[alan.jenkins1@ntlworld.com](mailto:alan.jenkins1@ntlworld.com).

Or if you prefer to give your details over the phone please ring **Steve Griffiths 07636672046**  
E mail: [sgriff@ntlworld.com](mailto:sgriff@ntlworld.com)

