



VALLEY STAGES RALLY VRC

Saturday, September 20th, 2025

Held under the provisions of the International Sporting Code of the FIA and the National Competition Rules of Motorsport Australia

Official Use Only

RECEIVED:	
CAR NUMBER:	

COMPLETE ALL DETAILS IN FULL USING BLOCK LETTERS

SPONSOR DETAILS (Appears on Entry List)

Name:

COMPETITOR DETAILS

Name:

Is the Competitor the owner of the vehicle? Yes ☐ No ☐ then owner's name:

Postal Address:

State:

Postcode:

Phone: (Mobile Preferred)

Email:

MA Licence Details: Licence Number:

Expiry Date:

DRIVER DETAILS

Name:

Postal Address:

State:

Postcode:

Phone: (Mobile Preferred)

Email:

D.O.B: Do you hold a Provisional Licence (P Plates)? Yes ☐ No ☐

Driver Grade: (Check one) A ☐ B ☐ C ☐ D ☐ E ☐ F ☐ I do **NOT** want to score Series Points in 2025 ☐

Officiated at (event):

Date:

Emergency Contact:

Phone:

Club Membership:

Club:

Number:

Expiry Date:

Civil Licence Details: Licence Number:

Expiry Date:

MA Licence Details: Licence Number:

Expiry Date:

CO-DRIVER DETAILS

Name:

Postal Address:

State:

Postcode:

Phone: (Mobile Preferred)

Email:

D.O.B: Do you hold a Provisional Licence (P Plates)? Yes ☐ No ☐

Co-Dr Grade: (Check one) A ☐ B ☐ C ☐ D ☐ E ☐ F ☐ I do **NOT** want to score Series Points in 2025 ☐

Officiated at (event):

Date:

Emergency Contact:

Phone:

Club Membership:

Club:

Number:

Expiry Date:

Civil Licence Details: Licence Number:

Expiry Date:

MA Licence Details: Licence Number:

Expiry Date:

VEHICLE DETAILS

Make:

Model:

Reg. No.:

Nom. Capacity:

cc

Colour:

Year:

Turbo: Y ☐ N ☐

Engine No.:

Class: Please Provide Vehicle Class eg PN5, G4, CRC etc.

MA Logbook No:

Drive Configuration: RWD ☐ FWD ☐ 4WD ☐

SCRUTINEERING All scrutineering must be arranged by the Competitor with a Motorsport Australia approved Rally Scrutineer

Scrutineer's Name:

Licence No:

SEEDING INFORMATION If not on Victorian seeding list, please provide an interstate seed, or Driver's results to assist organisers

Interstate Grade and Seed factor:

Note: start position is determined by Driver's seeding

Relevant Results: (Year, Event, Class, O/R Result, Class Result, other important information)

SERVICE VEHICLES AND CREWS

1. Service Vehicle Make:

Model:

Registration No.:

Colour:

Year:

Person in charge:

Contact No.:

Alternate contact:

Contact No.:

2. Service Vehicle Make:

Model:

Registration No.:

Colour:

Year:

Person in charge:

Contact No.:

Alternate contact:

Contact No.:

Competitor's and Crew's understanding:

I have read the Supplementary Regulations. I accept responsibility for the conduct of my Service Vehicle and Crew throughout the event and am aware that any misconduct by the Service Crew(S) could penalise the competing crew with heavy fines and exclusion.

Signed: Competitor:

Driver:

Navigator:

EVENT ENTRY FEES

Entry Fee:

VRC ☐ \$950

Payment Details:

EFT: State Driver's First Name initial then Surname preceded with VS (eg. **VS J Smith**),
BSB 013-225 **Account no.:** 2971 92428 : **Account name:** Nissan Car Club Australia Inc.

EFT ☐

Ref:

Date:

Cash

Not Accepted

Cheque

Not Accepted

Money Order

Not accepted

DECLARATION

ANY APPLICANT MAKING A FALSE DECLARATION IS LIABLE TO REFUSAL AND CANCELLATION OF LICENCE AND/OR INSURANCE COVER

I accept the conditions of, and acknowledge the risks arising from, attending or participating in Motor Sport Activities being provided by Motorsport Australia and the Entities. I agree to be bound by the rules, regulations and policies of Motorsport Australia at all times as a condition of continuing to hold a licence. The information I have entered into this form is true and correct and I will advise Motorsport Australia immediately if any of the information I have given is no longer true and correct. I have read, understood, acknowledge and agree to the above including the exclusion of statutory guarantees, warning, assumption of risk, release and indemnity.

Competitor's Signature

Date:

Driver's Signature

Date:

Navigator's Signature

Date:

PARENT/GUARDIAN CONSENT (Must be completed for all applicants under 18 years of age)

I (name) of (address)

am the ☐ parent ☐ guardian of the above-named ("minor") who is under 18 years of age.

I have read this document and understand its contents, including the exclusion of statutory guarantees, warning, assumption of risk, release and indemnity, and have explained the contents to the Minor. I consent to the Minor attending or participating in the event at his or her own risk.

Parent/Guardian Signature

Date: