



Registration Form for a vehicle to assist with a competitor's **reasonable** feeding and other requirements **as provided for in the Regulations.**

Title of Event: _____

Date of Event: _____

Name of Competitor: _____

Competitor's Club: _____

Competitor's Number: _____

A motor vehicle, make, model number and colour: _____

Registration Number: _____

Will be used to assist the above named competitor while taking part in the event as described above.

The name(s) of the driver(s) of the vehicle will be as follows:-

Driver(s): _____

NOTE

THE COMPLETION OF THIS FORM DOES NOT PERMIT YOUR HELPERS TO FOLLOW YOU ALONG THE COURSE.

THEY MAY PASS AT INTERVALS OF NOT LESS THAN 10 MILES

Completed forms must be lodged with the Event Secretary not later than the start time of the competitor.