

# Australian Society of Section Car Operators

**North Rockhampton – Nerimbera  
(x3 runs)**

**15<sup>th</sup> July 2018**



## Expression of Interest Form

**Meet Coordinator:** Andrew Simpson, Phone: 0481 298 944

**EOI Closing Date: 6<sup>th</sup> JULY 2018**

- To take part in this event, you must complete the relevant sections below. Forms will be returned for correction for incomplete sections, and may result in you missing out on the event.
- EOI forms must be strictly received by the closing date nominated. Late applications will not be accepted.
- Your financial, medical, and operating qualifications will be checked upon receipt of your EOI. Some expired qualifications (i.e. medical) may prohibit you from participating. Please contact the Meet Coordinator or Secretary for further information.

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### Section 1: Member Information

Name: \_\_\_\_\_

Membership Number: \_\_\_\_\_

*If your details have changed, please fill out the section below (optional):*

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Post Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

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### Section 2: Car Information (optional)

I intend to use the following section car for this event:

Car Model: \_\_\_\_\_ Fleet Number: \_\_\_\_\_ Manufacturer: \_\_\_\_\_

Engine Number: \_\_\_\_\_

I certify that this section car is compliant with Standard SD-0001 – Mechanical Standard:

Date of last annual inspection: \_\_\_\_\_

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### Section 3: Passenger Information (optional)

- I would like \_\_\_\_\_ to ride as a passenger on my section car.
- I would like to ride as a passenger with \_\_\_\_\_.
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### Section 4: Payment

Cost: \$50 per day for car owners who bring their car  
\$55 per day for passengers

Payment method: Direct Deposit (EFT):   
Cheque:   
Money Order:

I will be attending on the following days:  15<sup>th</sup>

Total amount paid: \$\_\_\_\_\_

**Return EOI form with (Cheque/money order) payment to:**

ASSCO  
PO Box 333  
MOUNT OMMANEY QLD 4074

**POSTAL ADDRESS HAS  
CHANGED**

#### Direct Deposit Details:

Account Name: Australian Society of Section Car Operators, Inc.  
Account BSB: 034-001  
Account Number: 444418  
Reference: Surname AND membership number

NOTE: If paying by direct deposit, payment must be received by the EOI closing date.

Scanned EOI forms (direct deposit payment only) can be emailed to: [admin@assco.com.au](mailto:admin@assco.com.au)

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### Section 5: Emergency Contact Details

In the interest of safety and as a precautionary measure, the Department of Transport and Main Roads request that the details of your emergency contacts be made available to the Meet Coordinator.

Emergency Contact:

Alternative Emergency Contact:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Suburb: \_\_\_\_\_

Post Code: \_\_\_\_\_ Post Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_ Mobile: \_\_\_\_\_

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## Section 6: Event Timetable

Sunday, 15<sup>th</sup> July 2018 – North Rockhampton – Nerimbera (x3 runs)

ZY71/Y71J

Location	Arrive	Depart	Comments
<b>North Rockhampton</b>		09:00	Pre-brief and machine prep, on-track.
Lakes Creek		09:12	
<b>Nerimbera</b>	09:24	09:34	Turn machines.
Lakes Creek		09:46	
<b>North Rockhampton</b>	09:58	10:08	Turn machines.
Lakes Creek		10:20	
<b>Nerimbera</b>	10:32	11:15	Morning tea, turn.
Lakes Creek		11:27	
<b>North Rockhampton</b>	11:39	11:49	Turn machines.
Lakes Creek		12:01	
<b>Nerimbera</b>	12:13	12:23	Turn machines.
Lakes Creek		12:35	
<b>North Rockhampton</b>	12:47		Turn machines.

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## Section 7: Other Details

Nil.

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## Section 8: Declaration

I acknowledge that I have read the safety management systems of ASSCO and agree to be bound by them for this event. I have paid to attend this event and also insurance (when required). I understand that restrictions on the maximum number of section cars will apply, and if the maximum accepted number is exceeded, some members may miss out. Applications will be accepted in the order in which they have been received pending the availability of accredited operators. I accept there is a risk any event may not proceed due to events beyond ASSCO's control. I understand that if I have expired qualifications, this may prohibit me from attending the event.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / 2018