

BRCA Large Scale Off Road (LSOR) Emergency Contact Form

| | |
|----------------------------|----------------|
| Racer\Pilot :- | |
| BRCA No. | Age:- |
| Home Address (a) :- | |
| | |
| Post Code:- | Phone:- |
| Email:- | |
| Vehicle | Freq 1 |
| Make | Freq 2 |
| Model | Freq 3 |
| CC | Freq 4 |
| PT Number | |

Emergency Contact

| |
|-------------------------|
| Name :- |
| Address :- |
| (If diff to (a)) |
| |
| Post Code :- |
| Phone:- |

If you do not wish to appear in any publications associated with this series then tick this box.

I agree to abide by the BRCA rules and regulations as in the current BRCA Handbook.

Signed..... Date.....

The BRCA LSOR section holds personal data in respect of its members on a computer. In accordance with the Data Protection Act 1984, the section may use such data for the following purposes:-

- a) disclosures to authorised officers of the Association for the purposes of day to day membership administration.
- b) the publication from time to time of a section list for the exclusive use of BRCA LSOR committee in pursuance of their duties and not for any trade purposes.

Data must be provided otherwise you will not be entered into the meeting.

**Remember anyone who goes trackside must have valid BRCA membership –
spot checks for non racers at every meeting and drivers must show a valid
BRCA card to participate.**

Section Ref Number..... (For Office Use Only)

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