

Electric Vehicle Expo

4th, 5th & 6th May 2018 Registration Form

Rally Entrant Details: Entries Close 3 April 2018.

Entrant Full Name: _____
(One entry form per person participating)

Address: _____

Phone: _____

Email: _____
(All electronic correspondence will be sent to this address)

Please note it is strongly recommended to book accommodation early to avoid disappointment. A list of providers is attached for your information.

Indemnity Statement:

*In consideration of acceptance of my entry and participation I hereby agree to the following:
I will be bound by all rules, regulations and directions of the National Transport Museum Organizing Committee.*

I understand that I enter and participate in the Rally & Expo at my own Risk.

To indemnify and keep indemnified jointly and severally the National Transport Museum and Expo Rally Organizing Committee, its volunteers and any sponsors from and against any and all liability for personal injury and/or damage to property whether arising out of or in connection with entering in and participating in the organized rally and expo.

Please note the Committee reserves the right to refuse entry to any entrant.

Entrant Signature: _____ Date: _____

Expo Participant Details

Registered Business Name: _____

ABN Number: _____

Listing Name: _____
(Your preferred name to be published)

Postal Address: _____

Phone Number: _____

Email: _____
(All electronic correspondence will be sent to this address)

Website: _____

Contact Name: _____

Type of Organization: _____

Size of requested site in Metres: _____
Please note the committee will attempt to accommodate your preferences, however, site size allocations will be on a first registered first served basis. Please also note that there is limited powered sites available at this outdoor event. For further discussions please Contact Kevin Dunn on the details listed below.

Do you require power? Yes No

Will your be bringing your own quickshade? Yes No

Please note it is strongly recommended to book accommodation early to avoid disappointment. A list of providers is attached for your information.

Insurance Details

Name of Public Risk and Product Insurer: _____

Policy Number: _____

Validity Dates: From: _____ To: _____
(Please provide a copy with return of your registration form).

Please return:

- Completed registration form
- Copy of Public Liability Insurance
(if you are wanting to participate in the expo only).

**And return to
National Transport Museum
P.O. Box 1103
Rifle Range Road
Inverell NSW 2360**

For more information please contact Kevin Dunn on Phone: (02) 6721 2270.