NORTH DEVON SPORTS AND CLASSIC CAR CLUB

Event Name…………………………………………………………………………………………………..

Event Date …………………………………………………………………………………………………..

Event Organiser…………………………………………………………………………………………..

I sign on behalf of the NDSCCC that I am a member and my car is M.O.T, Taxed and fully Insured.

