



Toowoomba & Lockyer Valley Kart Club Inc

PO Box152 TOOWOOMBA QLD 4350
Email : [Secretary- Membership - Licencing](#)
Contacts
0447 750008 – 0418 547265

CLUB KARTING LICENCE APPLICATION Annual Day Licence

Personal Information

Full Name: _____
Christian Name/s *Surname* .

Address: _____
- Street Address

_____ *Suburb / City* *State* *Post Code*

Home Phone: _____ Mobile Phone: _____

Email _____

Birth Date: _____ Gender: _____

Previous Motorsport experience or Motorsport Licence held

Licence : _____ Organization: _____

Start Date: _____ Grading _____

Emergency Contact Information

Full Name: _____
Christian Name/s *Surname* .

Address: _____
- Street Address

_____ *Suburb / City* *State* *Post Code*

Primary Phone: _____ Alternate Phone: _____

Relationship: _____

OFFICE Use: <i>Date Accepted</i>	Paid	Issued by:
Licence Issued: Expiry	#	

Please note Application for Annual licence/s submitted prior to 30th June will expire 31st December in current year – Applications submitted for Annual licence on or after 1st July will expire 30th June the following year.