



MSA OFFICIAL ENTRY FORM

EVENT NAME	EVENT DATE	PERMIT NR	
REGIONAL EXTREME FESTIVAL	13 AND 14 MAY 2022	MSA 16857	
DRIVER	ID NUMBER	CELL PHONE	EMAIL
Frederick Johannes Willem Jacobus LABUSCHAGNE	7608225005084	(083) 307-4544	johan@chemprog.co.za
ADDRESS	MEDICAL AID NAME		
42 Alice street, The Reeds CEnturion South Africa	Discovery		
EMERGENCY CONTACT NAME	EMERGENCY PHONE NUMBER	NEXT OF KIN NAME	NEXT OF KIN PHONE NUMBER
Antoinette Labuschagne	(083) 234-3804	Chris Labuschagne	(083) 307-6580

Categories and Classes

RACE CATEGORY 1	RACE CLASS 1
On the Track Clubmans	E

Vehicle Details:

Car 1 Details

MAKE 1	MODEL 1
Subaru	Impreza GT

Team Details:

TEAM NAME	TEAM EMAIL	TEAM CELL NR
Muller Developments	braam@mullerdev.co.za	713643064

DECLARATION/UNDERTAING TO BE SIGNED BY EVERY ENTRANT/ DRIVER/ RIDER

I/ We have read and understood GCR's 93, 94, 113, 121 and 122 of the MSA Handbook and the SR's of this event and signify my/our agreement to abide by these Rules by signing this entry form.

BY SELECTING "YES", I, THE DRIVER, ACKNOWLEDGES ELECTRONIC SIGNATURE OF THIS DOCUMENT.

Yes