

NATIONAL ASSOCIATION OF SPEEDWAY RACING To be returned to QSCA Inc. PO Box 298, GYMPIE 4570

SUMMARY SHEET FOR ANNUAL INSURANCES & LICENCES to be forwarded each month

A COPY OF THIS FORM TO BE RETAINED BY CLUB SECRETARY Please return this form with cheques to your State Secretary

Symbols for use in TYPE column

Driver = D; Mechanic = M; Official = O; Junior Drivers = JD; Junior Mechanic = JM; Bike Riders = R; Junior Bike Riders = JR; Sub Junior Bike Riders = SJR; Deluxe Driver = DD; Deluxe Mechanic = DM; Deluxe Official = DO

Office Use Only

Surname	Initials	Card No. Ins/Lic.	Returned Card No.	FAS Amt.	FAS Cat.	Nasr Amt.	Nasr Cat.	Prem	N	S
			TOTALS	\$						

Club Speedway Name:	
Address:	PH:
Summary Submitted by:	Date: