

# **GOLDEN JUBILEE EVENT**

**FIRST PATIALA CAR RALLY FOR THE BLIND**

**SUNDAY APRIL 09, 2017**

**Organised by :**

**PATIALA SCHOOL FOR THE BLIND**

## **ENTRY FORM**

**Please type or write in BLOCK LETTERS**

### **DRIVER**

Name			passport size photo
Address		M/F	
Mobile No.			
Driving License No.		Valid upto	
D.O.B.		Blood Group	Email:

### **ENTRANT NAVIGATOR**

**(to be nominated by Patiala School for the Blind)**

Name			passport size photo
Address		M/F	
Mobile No.			
D.O.B.		Blood Group	

### **PASSENGER NO. 1 (OPTIONAL)**

Name			passport size photo
Address		M/F	
Mobile No.			
D.O.B.		Blood Group	

## VEHICLE DETAILS

Make		Model		Colour	
Engine No.		Chasis No.			
Year of Manufacturing				Tax paid upto	
Insurance Policy No.		Rally Cove	Yes / No.		

We, the undersigned Driver and Navigator and Co-passengers (if any) hereby make an application to participate in the "The Blind Car Rally" of Patiala and certify that the particulars of our vehicle as stated in the application forms are correct and further that we have received and read the Rally Supplementary rules and Regulations, 2017 issued by the Organizers of the event. We DO AGREE TO BE BOUND by these regulations.

\_\_\_\_\_  
**Signature of the Driver**

\_\_\_\_\_  
**Signature of the Entrant Navigator**

\_\_\_\_\_  
**Signature of the Passenger No.1**

**Please Note :**

- (a) Two copies of passport size photos are required to be submitted with Entry Form.
- (b) Entry charges payable @ Rs.2000/- for a team.

**TO REGISTER, PLEASE CALL : 98888-83311, 98880-00198, 97800-43892**

[www.patialaschool.org](http://www.patialaschool.org), [info@patialaschool.org](mailto:info@patialaschool.org)