CANADIAN ASSOCIATION OF RALLYSPORT Application for CARS Performance Rally Permit



Name of Event:				
Event Website:				
Date(s):				
Recce	Registration	Competition	Awards	
Number of days of Competition:				
Length of Event:				
Organizing Club:				
Start Location:				
Finish Location:				
Shakedown: Yes	No Date:			
VIP rides: Yes □ N	o 🗖 Date:			
Status: Regional National Dual				
Regional Championship:				

Organizer	Clerk of the Course
Name:	Name:
Address:	Address:
City/Prov:	City/Prov:
Postal Code:	Postal Code:
Phone no. Day	Phone no. Day
Phone no. Evening	Phone no. Evening
Cellular no.	Cellular no.
Email address:	Email address:

For Regional event please send a copy of this to the CARS office, and Regional Director

For National event Please send a copy of this to the CARS office, Series Manager, and President