



# SIDEWAYS CLUB REGISTRATION FORM

\*REQUIRED INFORMATION PLEASE

NAME \*

ADDRESS \*

POSTCODE \*

CONTACT PHONE NUMBER(S) \*

YEAR STARTED RACING

WHAT SERIES DO YOU USUALLY RACE IN? \*

MARQUE

MODEL

YEAR

USUAL RACE NO.

REGISTRATION NO.

COLOUR

CC

MODIFICATION

WHAT CLASS WERE YOU PUT IN BY BARRY

PLEASE RETURN THE FULLY COMPLETED FORM TO:  
Cheng Lim, Unit 2, 11 Fieldings Road, Cheshunt,  
Waltham Cross EN8 9TL COPY, SCAN and  
email back to [cheng@thunderroadcars.com](mailto:cheng@thunderroadcars.com)

PLEASE SIGN & DATE \*