



COMPETITION LICENSE APPLICATION FORM

LAST NAME:		FIRST NAME:		INITIAL:
ADDRESS:				
CITY:	PROV/STATE:	COUNTRY:	POST/ZIP:	

Traffic or competition incidents experienced in the past five years (please use separate sheet if required)

NEWFOUNDLAND INTERNATIONAL COMPETITION LICENSE

Please circle driver or co-driver, class participating in, & experience level

Driver	Co-Driver		Targa	Grand Touring	Fast/Quick Tour
Previous Competitor		New/Novice		New/Experienced	

Newfoundland International Competition License Fee: \$125.00 + 15% HST = \$143.75																	
Payment Type: <input type="checkbox"/> E-Transfer <input type="checkbox"/> Paypal <input type="checkbox"/> Certified Cheque <input type="checkbox"/> Money Order <input type="checkbox"/> Cash																	
Credit Card Details:			Name on Card:														
Card#:												Expiry:			/		

By my signature below, I hereby certify that the information contained in and attached to this application is true and correct.

Signed: _____

Date: _____

Mail/Courier:
 Targa Newfoundland
 15 Lawton Crescent
 St. John's, NL
 A1A 4T6

Email:
registrar@targanewfoundland.com

Fax:
 709-753-7646

Payments (PayPal):
payment@targanl.com