

# BOOKING FORM



Please complete this booking form and return by either mail or facsimile (details are below).  
Alternatively, you can fill out our online form at [www.trackskill.com.au](http://www.trackskill.com.au).

Trackskill  
PO Box 127  
Glenside SA 5065

Fax: (08) 8262 9833

## Your Details

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

## Course Details

Driver Name: \_\_\_\_\_  
 Trackskill V8 Challenge  
 Other: \_\_\_\_\_  
Track: \_\_\_\_\_  
Drive Date: \_\_\_\_\_ (1<sup>st</sup> choice – optional if booking for gift voucher)  
\_\_\_\_\_ (2<sup>nd</sup> choice)

## Gift Voucher

Please check this box if this booking is for a gift voucher, and circle an option below

### Full Day / Half Day

\* The voucher recipient is the person listed in the "driver name" field

## Payment

Card Type: **VISA / MasterCard / BankCard**  
Name On Card: \_\_\_\_\_  
Card Number: \_\_\_\_\_  
Expiry Date: \_\_\_\_\_

- \$200 deposit  
 Full payment

I understand and confirm that it is a condition of Trackskill that the applicant sign an indemnity upon arrival and is undertaking this course at their own risk

Signed: \_\_\_\_\_  
Date: \_\_\_\_\_