

ANDRA DISPLAY DETAILS – INSURANCE

Event Organiser Affiliated Club/Track	
Responsible Person at Display	
Date/s	
Display Day / Times	
Pack Up Day / Times	
Type of Display	
Location Street Address	
Business Name to be Noted on CoC (if applicable)	
Expected Number of Vehicles on Display	
Details of Vehicles on Display	
Expected Number of Spectators (if applicable)	
Other Details	
Purpose	

Completed form to be emailed to info@andra.com.au