



**NOMINATION ADMINISTRATIVE
COMMITTEE 2025**

First Name
Last Name
Address
Phone
Email

I, _____ a member of AUSKART Racing hereby submit my name for
a position on the Administrative Committee as indicated below (cross the box/boxes
where you would like assist.

- | | | | |
|------------------------|--------------------------|----------------|--------------------------|
| Membership Officer | <input type="checkbox"/> | Scrutineer | <input type="checkbox"/> |
| Technical Officer | <input type="checkbox"/> | Safety Officer | <input type="checkbox"/> |
| Property | <input type="checkbox"/> | Track Ops | <input type="checkbox"/> |
| Web/Social Media | <input type="checkbox"/> | Club Liaison | <input type="checkbox"/> |
| Marketing/ Sponsorship | <input type="checkbox"/> | Enduro | <input type="checkbox"/> |

Signature of Nominee :.....

Dated :