



**SHAKEDOWN ENTRY FORM  
CAR NUMBER**

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**COMPETITOR INFORMATION**

<b>Driver:</b>	
<b>Co-Driver:</b>	
<b>Mobile Phone No:</b>	
<b>Team Contact</b>	
<b>Mobile Phone No:</b>	

**CAR**

<b>Make &amp; Model:</b>	
<b>Registration No:</b>	
<b>Colour:</b>	

<b>Date:</b>	<b>Signature:</b>
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Please send this form to: [info@safarirally.co.ke](mailto:info@safarirally.co.ke)