



KARTSPORT NEW ZEALAND AGE GROUP CHANGE FORM

This form is to be used to apply for a Competition Licence Age Group Change.

Name of Competitor: _____

DOB: _____

Current Age Group: _____

New Age Group: _____

Legal Guardian Name: _____

Signature: _____

Payment: There is a Fee of **\$20** (incl GST) for this change.

Cheque enclosed: (tick box)

Credit Card Payment:

Card Type _____
(VISA or Mastercard only)

Card Number: _____

Expiry Date: ____ / ____ **Security Code:** _____

Name on Card: _____

**PLEASE SEND THIS COMPLETED FORM PLUS YOUR CURRENT
COMPETITON LICENCE/LOG BOOK AND PAYMENT TO:**

**Competition Licence Secretary
KartSport New Zealand**

Mail only to: PO Box 28219, Remuera, Auckland 1541

Courier only to: Level 3, 45 Mt Wellington Highway, Mt Wellington, Auckland 1060

NOTE: For more information regarding Age Group Upgrades see Rule D1.3