

QUEENSLAND C O2 OR MINI DRAGSTER COMPETITION (Form A)

School:	Address:	
Contact Person:	Work Ph:	Fax:
Mobile:	Email:	

SURNAME GIVEN NAMES (Please Print or Type)	Division A GENERAL SHOP DIVISION YEARS 7 - 12	Division B STEM OPEN	Division C SPECIAL EDUCATION & PRIMARY	Division D TEACHERS OPEN	Division E OUTLAW CLASS	Division F SHOW & SHINE
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IMPORTANT MESSAGE

**PLEASE COMPLETE THE ABOVE SHEETS
AND SEND WITH YOUR DRAGSTERS**