ONE EVENT LICENCE ORDER FORM -2018

Auto-Cycle Union Ltd, ACU House, Wood Street, Rugby, Warwickshire CV21 2YX   Tel: 01788 566400

Licence Dept.   Fax: **01788 552967**   email: **licence@acu.org.uk**

One Event Licence books are available to ACU Centres and Clubs at a cost of   **£100.00 per book of 10 licences**.
Clubs are to charge £15.00 per licence. This includes an admin fee of £5.00 to be retained by the issuing Club.
Please ensure that all copy licences are returned to the **ACU Licence Department** within 14 days of the event.

Please return completed order forms to the ACU office and allow at **least 7 working days** for your order to be processed.

Name of   Organiser :

Name and address to which **order** should be sent:

Name:	Daytime phone no:
Address: Postcode:	

Please tick the **type of event** the One Event Licences will be issued for:-

Motocross: ☐   Grass Track: ☐   Enduro: ☐   Drag: ☐   Sprint: ☐   Hillclimb: ☐

If you are purchasing these licences for a specific event please provide the information below

Event ………………………………………. Permit no………………………….

If you are unsure of the event the licences will be allocated for or purchasing in bulk - please tick this box   ☐

Number of One Event Licence **books** required:	Total cost: **£**

Payment

Either : Cheque made payable to 'Auto-Cycle Union Limited' is enclosed   -   Please tick   ☐

OR   Request Invoice to be forwarded to the Organiser   - Please tick   ☐

OR   Enter the details of a Credit or Debit Card at the bottom of the page

FOR ACU OFFICE USE ONLY: - SENT

One Event Licence books numbered from:	to:	Date **sent**:
Order number:	Invoice number:	

FOR ACU OFFICE USE ONLY: Record of returned copies

Date received	Numbered From	To	Total	Date of Event	Credit Note number

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If paying by Bank transfer,, our bank details are : Sort Code No: 30-97-17   Account No: 00665774

If payment is to be taken using a credit / debit card, please enter details :

Card number: ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

Expiry date: ☐☐☐☐   Issue no :☐☐   Start date: ☐☐☐☐   Last 3 digits on signature panel: ☐☐☐

Billing Address - First Line   Town   Postcode

Cardholder's name: Cardholder's signature: