



SPEEDWAY AUSTRALIA LICENCE APPLICATION & MEDICAL FORM

TAX INVOICE
ABN: 11 373 518 738
All prices inclusive of GST
N.A.S.R. Incorporated (A24134)

Retain a duplicate of this application as a Tax Invoice
Licence Enquiries: (08) 8139 0777

OFFICE USE ONLY

- A valid Speedway Australia licence card must be produced at all racing events.
- Allow a **minimum** of five to ten (5 - 10) business days to process this application from the date received at Speedway Australia.
- Licences required sooner than above may attract a fast track fee (\$75).
- Licence is not valid until it is issued to you by your nominated/relevant association or club.
- **Applicants will receive a \$10 Discount off the full licence cost by applying online at www.speedwayaustralia.net.au**

HOW TO COMPLETE THIS FORM

Complete this form using black or blue pen. Where requested, tick the appropriate boxes. Please tick the following:

- I will be posting this application directly to Speedway Australia Head Office
- I will be emailing this application directly to Speedway Australia Head Office
- I will be faxing this application directly to Speedway Australia Head Office (photo will be emailed or posted)

Post: Speedway Australia PO Box 269 Stepney SA 5069 **Email:** admin@speedwayaustralia.net.au **Fax:** (08) 8363 7977

SECTION 1 - LICENCE STATUS

Have you previously held a NASR/Speedway Australia Licence? Yes No

New Licence No:

If YES, please print your previous Licence Number: _____

OFFICE USE ONLY

SECTION 2A - PERSONAL DETAILS

Full Legal Name:

Postal Address:

Suburb/Town: State: Post Code: Sex:

Email: DOB: / /

* Please Note: Email addresses will be used to inform you of important safety and news bulletins. Personal details will not be distributed to 3rd parties or used inappropriately.

Phone (H): () Phone (W): ()

Fax: () Phone (M):

Assoc/Club: SPEEDWAY ASSOCIATION/CLUB NAME MUST BE COMPLETED BY ALL APPLICANTS

* Please Note: All applications will be returned to you via the relevant Association or Club.

SECTION 2B - BENEFICIARY DETAILS

Surname: Given Name(s):

Postal Address:

Suburb/Town: State: Post Code:

Phone (H): () Phone (M):

SPEEDWAY AUSTRALIA

Phone: (08) 8139 0777 Email: admin@speedwayaustralia.net.au
Fax: (08) 8363 7977 Web: www.speedwayaustralia.net.au

Date Received:

OFFICE USE ONLY

SECTION 3 - LICENCE CATEGORIES

LICENCE FEES

- Drivers must clearly indicate the division(s) that reflects your racing activities below (limit 4 divisions).
- Officials and Mechanics must clearly indicate your licence class by placing a tick in the appropriate section.
- The licence class required for each division is noted beside the corresponding checkbox.
- You are only required to pay for the highest licence category selected.
- Vintage & Extraneous Applicants, you must complete a waiver form. Form is available at www.speedwayaustralia.net.au.
- Personal Accident Insurance is provided by Speedway Australia with purchase of a licence.

STANDARD PRICING:

AA \$290 A \$235 ASCF/SSA \$200 B \$195 JD \$105 JDASCF \$105 JDJQMA \$105
 C \$125 D \$125 E \$130 V \$130 JM \$80 JO \$80

RECEIVE A \$10 DISCOUNT OFF STANDARD PRICING BY APPLYING ONLINE AT WWW.SPEEDWAYAUSTRALIA.NET.AU

NATIONAL DIVISIONS

Division	Tick	Class
AMCA Nationals		A
ASCF Junior Sedans		JDASCF
ASCF Mod Productions		ASCF
ASCF Prod Sedans		ASCF
ASCF Street Stocks		ASCF
ASCF Super Sedans		AA
ASCF 4 Cylinder Sedans		ASCF
Compact Speedcars		A
Formula 500s		A
Junior Quarter Midgets		JDJQMA
Late Models		AA
Lightning Sprints		A
Micro Sprints		A
SKAA Karts		B or JD
Speedcars		AA
Sprintcars		AA
360 Sprintcars		AA
V8 Dirt Modifieds		A
Wingless Sprints (AWSR)		A

VIC STATE DIVISIONS

Division	Tick	Class
1200cc Juniors		JD
3 Litre Sedans		ASCF
650 Quarter Sprints		B
Bombers		B
Crash & Bash		B
Gossa Sedans		A
GP Midgets		A
GV Open Sedans		A
GV Limited Sedans		A
GV Ladies Standard Saloons		B
Limited Sportsman		B
Marsh Modifieds/ A Mod/ B Mod		B
Open / Standard Saloons		A
Quarter Midgets		B
Short Course		B or JD
Super Rods		A
VSC V8 Super Modifieds		A
VSC Sports Sedans		A
VSC Ladies		A
V8 Trucks		A

QLD STATE DIVISIONS

Division	Tick	Class
4 & 6 Cylinder Sedans		B
Club Sedans		A
Dwarf Cars (Aus Mod Lite)		B
Fender Benders		B
Ford v Holden		B
Formula 400s		B
Junior Street Sedans		JD
Limited Sprinter		A
Nostalgia Sedans		B
Open Sedans (V8)		A
Outlaw Sedans		A
Outlaw Sprint Sedans		A
Rollover Cars		A
Sigmas		B
Stock Cars		B
Street Sedans		B
Super Stocker		A
Super Street Sedans		B

WA STATE DIVISIONS

Division	Tick	Class
320 Sprintcars		AA
Limited Sprintcars		AA
Super Mods		B
Super Six		B

NSW STATE DIVISIONS

Division	Tick	Class
1600 Sedans		B
4 Cylinder Sedans		B
Aussie Sixes (inc Aus/OzCars)		B
Dwarf Cars (Aus Mod Lite)		B
Fender Benders		B
GP Midgets		A
Junior Under 1600s		JD
Light Trucks		A
Limited Sedans		B
Limited Sprintcars		AA
Quarter Midgets		B
RSA Street Stockers		B
Series Production Sedans		B
Short Course		B or JD
Speedway Utes		A
Super Modifieds		A
Super Production Series		B
Legends		B

NT STATE DIVISIONS

Division	Tick	Class
Bombers		B

SA STATE DIVISIONS

Division	Tick	Class
Limited Sportsmen		B
Dwarf Cars (Aus Mod Lite)		B

TAS STATE DIVISIONS

Division	Tick	Class
Bombers		B
Limited Saloons		B
TAS Sedans		B
Tassie Six		B

EXTRANEIOUS / VINTAGE / CLASSIC

Division	Tick	Class
Burnouts		E
Caravan Race		E
Classic / Vintage		V
Demo Derby		E
Figure 8		E
Heavy Hot Rods (VIC)		V
Humpy Holdens (VIC)		V
Mud Trials		E
Ramp Race		E

OFFICIALS / MECHANICS

	Tick	Class
Official		D
Junior Official*		JO
Mechanic/Pit Entry		C
Junior Mechanic*		JM

* Junior Mechanic/Official Minimum Age: 12 (14 in NSW)

SECTION 4 - CONSENT STATEMENT FOR MINORS

This section is only required if the applicant is under 18 years of age.

I, of

am the (*circle one*) FATHER / MOTHER / LEGAL GUARDIAN of the above named applicant who is under the age of 18 years. I have read this document and understand its content, including the exclusion of liability and assumption of risk. I have explained the content of this form to the applicant. I hereby consent to the applicant participating in speedway events ("the event") at his/her own risk.

Signed: Date:

SECTION 5 - PRIVACY STATEMENT & DECLARATION

Speedway Australia requires the information requested in this document to assess your application and, if accepted, provide you with a licence. Your personal information will only be used in accordance with the objectives of Speedway Australia and Speedway Australia general business. You will be able to access your information through Speedway Australia with reasonable notice.

In exchange for being able to attend or participate in the event, I agree:

- to unconditionally and irrevocably release, discharge and hold harmless Speedway Australia employees, directors, promoters, sponsor organisations, land owners and lessees, organisers of the event, their respective servants, officials, representatives and agents (collectively, the "Associated Entities") from and against all liability for death, personal injury (including burns), psychological trauma, loss or damage (including property damage) ("associated harm") howsoever arising from my participation in or attendance at the event, except to the extent prohibited by law;
- that Speedway Australia and the Associated Entities do not make any warranty, implied or express, that the event services will be provided with due care and skill or that any materials provided in connection with the services will be fit for the purpose for which they are supplied; and
- to attend or participate in the event at my own risk.

I/we acknowledge and agree that:

- The risks associated with attending or participating in the event include the risk that I may suffer harm as a result of:
 - motor vehicles (or parts of them) colliding with other motor vehicles, persons or property;
 - acts of violence and other harmful acts (whether intentional or inadvertent) committed by persons attending or participating in the event; and
 - the failure or unsuitability of facilities (including grandstands, fences and guard rails) to ensure the safety of persons or property at the event.
- Motor sport is dangerous and that accidents causing harm can and do happen and may happen to me.
- Other than as notified to Speedway Australia in writing, I have not been charged with a criminal offence within the last 12 months. I will notify Speedway Australia in writing if I am charged with a criminal offence while I hold a Speedway Australia licence.

I agree to be bound by the rules and regulations of any speedway event at which I am to attend or participate as well as the provisions, rules and policies of N.A.S.R. Incorporated and National Association of Speedway Racing Pty Ltd ("Collectively Speedway Australia") and any National or State Regulatory Bodies of the division in which I participate ("Associated Entities"). I further agree to be bound by all rules, policies and regulations published by Speedway Australia, from time to time, and to follow all reasonable directions and requirements stipulated by Speedway Australia in relation to my licence.

I agree that the continuation of my licence is subject to my compliance at all times with this section (Section 5).

I accept the conditions of, and acknowledge the risks arising from, attending or participating in the event and being provided with the event services by Speedway Australia and the Associated Entities.

I have read, understand and agree to be bound by the Declaration above. I accept and agree to abide by the Speedway Australia Drug and Alcohol Policy.

Signed: Date:

Attach your passport sized photo here. Print name clearly on reverse.

Photo required every 3 years for seniors, officials and mechanics, or every year for all juniors.

SPEEDWAY AUSTRALIA

Phone: (08) 8139 0777 Email: admin@speedwayaustralia.net.au
Fax: (08) 8363 7977 Web: www.speedwayaustralia.net.au

Date Received:

OFFICE USE ONLY

PAGE 3 OF 6

SECTION 6 - PAYMENT DETAILS

Licence Cost: \$

Medical Search Fee: \$

Fast Track Fee: \$

Total Amount Payable: \$

Payable if you wish to use a medical submitted in the last 2 years, on file at Head Office, and you are unable to provide a copy (\$50).

Licences required in less than 5 business days from date application received at Speedway Australia Head Office (\$75).

All licences will be returned to you via the relevant association or club.

PAYMENT METHOD

	Tick
Credit Card	<input type="checkbox"/>
Cheque (Payable to Speedway Australia)	<input type="checkbox"/>
Money Order (Payable to Speedway Australia)	<input type="checkbox"/>

TAX INVOICE

All prices include GST. ABN: 11 373 518 738

CREDIT CARD DETAILS

Card Type: **VISA** **Mastercard**

Card No: Expiry: /

Name:

Signed: Date: / /

SECTION 7 - CHECKLIST

SENIOR CHECKLIST

Aged 16 years and older

Tick

I have completed the attached health statement (Section 8). (Not required for Officials/Mechanics)	<input type="checkbox"/>
Medical Examination (Section 9): (Not required for Officials/Mechanics)	
<input type="checkbox"/> I am a new driver , and a medical practitioner has completed the attached medical form declaring me fit for racing. I am supplying a medical completed within the last 3 months.	
OR	
<input type="checkbox"/> I am a renewing driver 40 years of age or older. I am supplying a medical completed within the last 3 months.	
OR	
<input type="checkbox"/> I am a renewing driver under 40 years of age. I am supplying a medical completed within the last 2 years. Please Note: SCCA Drivers must supply a new medical every year regardless of age, as per the SCCA rule book.	
A medical completed within the last 2 years on file at Speedway Australia may be used for a \$50 search fee.	
<input type="checkbox"/> I have been diagnosed as colour deficient. I have obtained and attached a flag test document from www.speedwayaustralia.net.au and completed this test under the supervision of a club official.	
If required, I have attached a passport sized photo (Section 5).	<input type="checkbox"/>
If I have never provided a proof of age, I have attached clearly legible proof of age documentation with either a Birth Certificate, Drivers Licence, Passport, Proof of Age Card or Student ID.	<input type="checkbox"/>
If I have selected Vintage or Extraneous Licence Classes, I have completed a Waiver Form (available at speedwayaustralia.net.au).	<input type="checkbox"/>
I have completed all payment details in Section 6.	<input type="checkbox"/>

JUNIOR CHECKLIST

Aged under 17 on July 1 of the current calendar year

Tick

I have completed the attached health statement (Section 8). (Not required for Officials/Mechanics)	<input type="checkbox"/>
A medical practitioner has completed the attached Medical Examination (Section 9) (Not required for Officials/Mechanics), declaring me fit for racing. I am supplying a medical completed within the last 2 years. Please Note: JQMA Drivers are not required to submit a medical.	
A medical completed within the last 2 years on file at Speedway Australia may be used for a \$50 search fee.	
<input type="checkbox"/> I have been diagnosed as colour deficient. I have obtained and attached a flag test document from www.speedwayaustralia.net.au and completed this test under the supervision of a club official.	
I have attached a passport sized photo, taken within the last 3 months.	<input type="checkbox"/>
If I have never provided a proof of age, I have attached clearly legible proof of age documentation with either a Birth Certificate, Drivers Licence, Passport, Proof of Age Card or Student ID.	<input type="checkbox"/>
I have completed all payment details in Section 6.	<input type="checkbox"/>



SPEEDWAY DRIVERS HEALTH STATEMENT & MEDICAL FORM

Retain a duplicate of this application for your records
N.A.S.R. Incorporated (A24134)

To avoid delays, please ensure you read and complete this form in its entirety. **Please Note:** This health statement *must be completed annually* and submitted with licence applications. All information in this Health Statement & Medical Form is supplied in confidence.

SECTION 8 - HEALTH STATEMENT (COMPLETED BY APPLICANT)

Name: Licence No:

1.1: Regular Doctor's details

Name: Practice:

Address:

Suburb/Town: Postcode: Phone: ()

1.2: Are you currently or have you taken any medication in the last 12 months? Yes No

If yes, use the space below to indicate prescription and non prescription medications, in addition to alternative/natural remedies.

1.3: Do you have any allergies? Yes No

If yes, use the space below to indicate the allergies you suffer from.

1.4: Have you ever had any surgical operations? Yes No

If yes, use the space below to indicate the details of any operations.

1.5: Have you ever suffered from an illness that has required treatment by a Specialist or Hospital Doctor? Yes No

If yes, use the space below to indicate the details of any treatment(s).

1.6: Do you suffer from any other condition that may affect or inhibit your ability to drive? Yes No

If yes, use the space below to list these conditions.

1.7: Do you wear glasses or contact lenses? Yes No

1.8: Are you currently a smoker? Yes No

1.9: If yes, how many cigarettes do you smoke per day?

I have answered all of the questions above honestly and completely, to the best of my knowledge and is not misleading or deceptive. I understand that a medical opinion regarding my fitness to compete will be formulated based upon the answers I have provided here and I consent to Speedway Australia using this information to form an opinion. I will advise Speedway Australia if I suffer any condition, illness or injury which may affect my ability to compete in speedway racing. I will abide by the Speedway Australia Drug & Alcohol policy at all times. Should there be any change to the information I have supplied, I will advise Speedway Australia at the earliest possible convenience. I agree to provide Speedway Australia with any and all health or medical information requested. I acknowledge that Speedway Australia may need to request additional health and medical information from my nominated medical practitioner. I unconditionally authorise my medical practitioner or qualified party to provide medical information about me upon request by Speedway Australia. I acknowledge that Speedway Australia, at their discretion, may disclose the information provided on this form to third parties in the event Speedway Australia deems it important to my health and safety. **For female applicants:** I agree to abstain from exercising the privileges of this licence during the last four (4) months of pregnancy. I acknowledge that this form and attached medical examination will be forwarded to Speedway Australia.

Signed: Date: / /

SECTION 9 - MEDICAL EXAMINATION (COMPLETED BY MEDICAL PRACTITIONER)

MEDICAL STANDARDS AVAILABLE AT www.speedwayaustralia.net.au

Applicant's Full Name:

Racing Division: Licence No: DOB: / /

Height (cm): Weight (kg): BMI: Pulse: Blood Pressure:

Please see Medical Standards at www.speedwayaustralia.net.au
Please attach separate page(s) if space is not sufficient

		Normal	Abnormal	Comments
3.1	History suggesting heart disease?			
3.2	Heart sounds			
3.3	Peripheral circulation			
3.4	History suggesting respiratory disease?			
3.5	Respiratory system			
3.6	Abdomen/gastro-intestinal system			
3.7	History suggesting psychiatric or neurological problems?			
3.8	Cranial nerves			
3.9	Upper limbs - power, tone and reflexes			
3.10	Lower limbs - power, tone and reflexes			
3.11	Skeletal system and joint system			
3.12	Hearing/vestibular system			
3.13	Co-ordination			
3.14	Urine testing			
3.15	History suggesting visual problems?			
3.16	Visual fields			
3.17	Eye movements			
3.18	Cover test			
3.19	Colour vision (Ishihara)			

	Visual Acuity	L	R	Comments
	Unaided	/6	/6	
	With Correction	/6	/6	

I have personally examined the applicant on (date) / / On the basis of my examination and the information supplied by the applicant:

- I could find no evidence of any physical or mental illness that would exclude the applicant from competing in speedway racing.
- I consider that the applicant may be suffering from a medical condition that may have an adverse affect upon his/her ability to compete safely in speedway racing (please attach details). **Please Note:** A BMI outside of the healthy range may be considered unfit.

Please tick the applicable box and attach any information which may assist the Speedway Australia medical advisor in determining the applicant's fitness to compete. If suffering from an illness, please specify medications and dosage that will assist in review of this application.

DOCTOR'S OFFICIAL STAMP

Name:

Signed:



VINTAGE, CLASSIC & EXTRANEIOUS EVENTS DRIVER RELEASE AND WAIVER OF LIABILITY

ASSUMPTION OF RISK & INDEMNITY AGREEMENT & DECLARATION

Retain a duplicate of this application for your records
N.A.S.R. Incorporated (A24134)

OFFICE USE ONLY

SECTION 1 - DECLARATION

I, Speedway Australia Licence #:

hereby acknowledge and accept full responsibility for my fitness to drive a Vintage or Classic Car for demonstration purposes or a vehicle for extraneous event purposes on speedway race tracks for the current season, expiring on 30 June 2012. I believe that I am of a fitness level that is adequate for the purpose and accept full responsibility for my actions, (voluntary and involuntary) while driving a vehicle, and declare that there is absolutely no reason to suggest that I would not be fit for that purpose.

I understand that if I have any doubts in relation to signing this document, I should refrain from doing so and seek the advice of a medical professional to administer a full medical report to satisfy my concerns.

Please note: The signing of this waiver does not preclude you from any payments under the personal accident scheme.

Signed: Date: / /

WITNESSED AND SIGNED:

- I am 18 years of age or over.
- This form was signed by the applicant in my presence.

Name:

Signed: Date: / /

THIS FORM MUST BE ACCOMPANIED BY A COMPLETED LICENCE APPLICATION



TWO SEATER PROMOTIONAL RACE VEHICLE PASSENGER LICENCE

TAX INVOICE
ABN: 11 373 518 738
All prices inclusive of
GST

WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT & DECLARATION

Retain a duplicate of this application for your records
N.A.S.R. Incorporated (A24134)

OFFICE USE ONLY

SECTION 1 - DECLARATION

I,

hereby acknowledge and accept full responsibility for my fitness to ride as a passenger in the promotional two-seater race vehicle on the speedway race track on the day noted. I believe that I am of a fitness level that is adequate for the purpose and accept full responsibility for my actions, (voluntary and involuntary) while riding, and declare that there is absolutely no reason to suggest that I would not be fit for that purpose.

I understand that if I have any doubts in relation to signing this document, I should refrain from doing so and seek the advice of a medical professional to administer a full medical report to satisfy my concerns.

FEE PAYABLE: \$10

This fee includes Personal Accident Insurance Coverage.

Signed: Date:

Venue: Date:

WITNESSED AND SIGNED:

- I am 18 years of age or over.
- This form was signed by the applicant in my presence.

Name:

Signed: Date:



DRIVER RELEASE AND WAIVER OF LIABILITY

ASSUMPTION OF RISK & INDEMNITY AGREEMENT & DECLARATION

Retain a duplicate of this application for your records
N.A.S.R. Incorporated (A24134)

OFFICE USE ONLY

SECTION 1 - PERSONAL DETAILS

Surname: Given Name(s):

Postal Address:

Suburb/Town: State: Post Code: Sex:

Email: Age: DOB: / /

* Please Note: Fax and/or email address will be used to return this licence. Returned form becomes a valid licence which must be produced at events.
* Email addresses will be used to inform you of important safety and news bulletins. Personal details will not be distributed to 3rd parties or used inappropriately.

Phone (H): () Phone (W): ()

Fax: () Phone (M):

Venue: Event Date(s): / / - / /

SECTION 2 - CONSENT STATEMENT FOR MINORS

This section is only required if the applicant is under 18 years of age.

I, PRINT FULL NAME of PRINT FULL ADDRESS

am the (circle one) FATHER / MOTHER / LEGAL GUARDIAN of the above named applicant who is under the age of 18 years. I have read this document and understand its content, including the exclusion of liability and assumption of risk. I have explained the content of this form to the applicant. I hereby consent to the applicant participating in the event at his/her own risk.

Signed: Date: / /

SECTION 3 - WAIVER STATEMENT & DECLARATION

I,

hereby acknowledge and accept full responsibility for my fitness to drive or be a passenger in a race vehicle for racing purposes on speedway race tracks for this day only. I believe that I am of a fitness level that is adequate for the purpose and accept full responsibility for my actions (voluntary and involuntary) while driving a race vehicle, and declare that there is absolutely no reason to suggest that I would not be fit for that purpose.

I understand that if I have any doubts in relation to signing this document, I should refrain from doing so and seek the advice of a medical professional to administer a full medical report to satisfy my concerns.

Please note: The signing of this waiver does not preclude you from any payments under the personal accident scheme.

Signed: Date: / /

WITNESSED AND SIGNED:

- I am 18 years of age or over.
- This form was signed by the applicant in my presence.

Name: Signed: Date: / /



Date Received:

OFFICE USE ONLY

2011-12 JQMA (NSW, QLD & JQMV) MEMBERSHIP FORM

Retain a duplicate of this application for your records
N.A.S.R. Incorporated (A24134)



SECTION 1 - MEMBERSHIP TYPE (TICK ONE)

I wish to apply for a: Family (\$150) Associate (non-racing) (\$50) Pit Crew/Handler (\$50) Official (\$50)

My Association is: JQMV (VIC) JQMA NSW JQMA QLD

SECTION 2A - INDIVIDUAL / FAMILY CONTACT DETAILS

Surname: Given Name(s):

Postal Address:

Suburb/Town: State: Post Code: Sex:

Email: Age: DOB: / /

* Email addresses will be used to inform you of important safety and news bulletins. Personal details will not be distributed to 3rd parties or used inappropriately.

Phone (H): () Phone (W): ()

Fax: () Phone (M):

SECTION 2B - FAMILY MEMBERSHIP NAMES

Family Member Name: PRINT FULL NAME Tick: Driver Crew Handler

Family Member Name: PRINT FULL NAME Tick: Driver Crew Handler

Family Member Name: PRINT FULL NAME Tick: Driver Crew Handler

Family Member Name: PRINT FULL NAME Tick: Driver Crew Handler

Family Member Name: PRINT FULL NAME Tick: Driver Crew Handler

Family Member Name: PRINT FULL NAME Tick: Driver Crew Handler

* Please Note: Family Membership applies to immediate family ONLY.

SECTION 3 - PAYMENT DETAILS

PAYMENT METHOD

Tick

Cash	<input type="checkbox"/>
Cheque (Payable to JQMV, JQMA NSW or JQMA QLD)	<input type="checkbox"/>

Total Fee: \$

Membership No: OFFICE USE ONLY

All fees are inclusive of GST and include JQMA membership contribution. Please return your completed form with payment to the appropriate address on the bottom of this form.

The JQMA Limited is a not-for-profit organisation established to organise a uniform Australian junior Motor Speedway racing series for children and young adults to enjoy Speedway racing at an early age.

Family Membership holders receive the JQMA Rule Book, membership card and JQMA newsletters, in addition to competing in Junior Quarter Midget Races. Membership period is for the financial year, starting July 1 2011 and ending June 30 2012.

OFFICE USE ONLY