





## **TR Group Trucking Relay 2025 Registration Form**

ream name:
Driver 1 - Team Leader:
Driver 2 - Truck Driver:
License Number:
Driver 3 - Forklift Driver:
License Number:
Phone:Email:
Office only
License check License check
Sighted by Name
By signing this form you agree to:
Compete in a safe and compliant manner.
Wear the correct PPE at all times.
· Agree that the judge's decision is final and will not be disputed.
· Consent to photos of participants being shared on public platforms. These photos are the property of the NZ Trucking Association and may be used for industry promotional advertising.
Signed on behalf of the team
Name
Signature

Email completed form to: info@trucking.nz