**Dual Personality Register**

**Registration Form**

|  |  |
| --- | --- |
|  Name: (Mr/Mrs/Miss/Ms/Other) |    |
| MMOC Number: (If applicable)  |  |
| Address: |  |
| Email Address:  |  |
| Vehicle type/model/2 or 4 door etc: |  | **Colour:** |  |
| Registration Plate: |  | **Year:** |  |
| Chassis Number: |  |
| Any major Modifications: (E.g., engine, wheels,brakes, differential, conversion to convertible etc): |  |
| Any Other points of interest or comments:  |  |

**Please forward this form by email to:** dualpersonalityminors@outlook.com

**Privacy Statement**

By completing this form, you agree to share the information provided for the sole use of maintaining the Dual Personality Register which will by accessed only by the registrars listed above. This information will not be shared with third parties.