

FUCHS OIL AUTOCROSS NOVÁ PAKA FIA EUROPEAN CHAMPIONSHIP

ENTRY FORM

EVENT:	NOVÁ PAKA (CZE)	DATE:	0305.07.2015	
ORGANISER				
Name:	AUTO KLUB V AČR NOVÁ PAKA	The entries must rea	ch the organiser by:	
Address:	Štikov 122 CZE-509 01 Nová Paka			
Tel+Fax:	+420 493 722 475	2	29.06.2015	
E-mail:	autoklubnp@seznam.cz			
COMPETITOR	R:	_		
Name:	—	Division:	TAX - JB - B1600 - SB	
Nationality:				
Address:		Start number:		
Tel:		 Competition licer	Competition licence numbers:	
Fax:				
E-mail:		Competitor:		
DRIVER:		Driver:		
Name:				
Date of Birth:		Signature:		
Nationality:				
Address:		Competitor:		
Tel:		 Driver:		
Fax:				
E-mail:		Date:		
A.S.N. (Visa Stamp):				
MAKE:		cc:	hp:	
MODEL:			·····	
FIA - Homolog	ation No:			
FIA Technical Passport No:				
Transponder No:				
Turbo :	Yes 4WD : Yes	Weight:	kg	
	No No	••••		

We confirm that we have read and understood the provisions of the International Sporting Code, the Autocross Technical Regulations and the Autocross Sporting Regulations and we agree, on our own behalf and on behalf of everyone associated with our participation in the 2015 FIA European Autocross Championships, to observe and be bound by them (as supplemented or amended). We declare that we have examined this Entry Form and that the information given is true, correct and complete. We understand that any change to the details given on this Entry Form must be notified to the organiser.