



ENTRY FORM

FIA EUROPEAN CHAMPIONSHIPS FOR AUTOCROSS DRIVERS

EVENT: **NYIRÁD** COUNTRY: **HUNGARY** DATE: **19-21.08.2016.**

ORGANISER

Name: **Nyirád Motorsport Kft.**
Address: H-1051, Budapest, Október 6. u. 4. 1/1
Tel: +36 70 778 4560
E-Mail: nyiradmotorsport@gmail.com

CLOSING DATE(S) FOR ENTRIES

The entries must reach the organiser by:
(with copy of competitor and driver licence)
for entries at normal fee 220 € **01.08.2016**
for entries at increased fees 275 € **10.08.2016**
Internet: www.nymc.eu

COMPETITOR

Name:
Nationality:
Address:
Tel:
Fax:
E-mail:

FIA Division: **Touring AX**
Buggy 1600
Super Buggy
Junior Buggy

Start number:

DRIVER

Name:
Surname:
Date of Birth:
Nationality:
Address:
Tel:
Fax:
E-mail:

Competition licence numbers :

Competitor:
Driver:
Signature:
Competitor: _____
Driver: _____
Date:

A.S.N. (Visa Stamp):

Make: Model ccm hp
FIA - Homologation N° FIA Technical Passport N°
Transponder N° Cylinder No:
Turbo: **Yes / No** 4WD: **Yes / No** Weight: kg

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 FIA European Championships for Autocross drivers, 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.

Please send copy of licence (competitor and driver) with the entry form!