



ENTRY FORM

FIA EUROPEAN CHAMPIONSHIPS FOR AUTOCROSS DRIVERS, 6th Round

EVENT: **NYIRÁD (H)** COUNTRY: **HUNGARY** DATE: **18/19.08.2012**

ORGANISER

Name: Nyirád Motorsport kft.
Cím: 1151 Budapest, Bogáncs u. 1-3.
Tel: +36 30 6595758
Fax: +36 1 2710084
E-mail: nyiradmotorsport@gmail.com

CLOSING DATE(S) FOR ENTRIES

The entries must reach the organiser by:

for entries at normal fee **04.08.2012.**

for entries at increased fees **11.08.2012.**

IBAN: HU 7412 0428 0901 1281 5300 2000 05; SWIFT: UBRTHUHB

COMPETITOR

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

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

Start number:

Paddock 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 cc hp
FIA - Homologation N° FIA Technical Passport N°
Transponder N°
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.