













## Place: Nyirád, MOTORSPORT CENTRUM

## nyiradmotorsport@gmail.com

Date: 24-26.06.2016.

## **ENTRY FORM**

RCE yes / no	CEZ yes / no	National yes / no
Start Nr.:	Division:	Category:
	Competitor:	Driver:
Name:		
Address (with ZIP code):		
Phone:		
E-mail:		
Licenc Nr:		
Representative of the competitor:		
	The Car	
Make/Model:	Chassis Nr.:	FIA Homologation Nr.:
ccm: Turbo: yes / no	Division:	4wd / 2wd
Regulations and undertakes implemented during the rac	s to strictly observe them. By si ce, alcohol and drug test.He con e entered car conforms with the	oss Standard Regulations and Supplementary gning the entry form the driver consent to be afirms that the statements made on this entry current conditions of the Int. Sporting Code,
Date:	Signature competitor:	Signature driver:

