

		<b>For Moto Club Sardegna only</b>	
		Foto (2)	n° Dossier
		Scheda medica	Cauzione
		Curriculum	Ricevuta il
		Rooming List	N° di Gara
		Pagamenti	Ricevuto il
		Ricevuta	del

### PILOT ENTRY FORM

<b>Family name</b>		<b>Name</b>	
Address	N°	Post Code	City
Country	Nationality	Blood Group	
Date and place of birth			Sex
Tel. N° (private)	Tel. N° (office)		Mobile
Fax	E-mail		
Job	Driving Licence N°	Date and place of issue	
Licence N°	FMN:	Fiscal Code	
Moto Club	FMN Card N°	T-shirt size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL	

### TEAM

Name:		Address		N°
Post Code	City	State	Country	
Tel. N°	Mobile		Fax	
E-mail	Licence 08 N°	Vat	F.C.	

### MOTO QUAD

Make	Model	Displacement
Plate	Owner	N° Chassis
N° of motor	Registration n°	
Insurance	N° of policy	Date of issue

<b>CLASSES</b>	<b>CATEGORY</b>
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<b>Italian Championship:</b>	
<b>European Championship:</b>	

### IN CASE OF EMERGENCY PLEASE CONTACT

<b>Assistance</b>	<b>Name</b>	<b>Telephone</b>
<b>Person Family</b>	<b>Name</b>	<b>Telephone</b>

### ENTRY FEE PILOT

<input type="checkbox"/> ENTRY FEE PER PERSON (before 15/09/2009)	€400,00
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**You need to make the payment by money transfer to:** A.s.d. Moto Club Sardegna  
 Banco di Sardegna Ag. n° 12 - Cagliari - Italy - Code IBAM: IT 98 I 01015 04812 000070066118 - Code SWIFT: SARDIT3SXXX

**RECEIPT:** A.s.d Moto Club Sardegna, will issue only one receipt headed to the name and address of the paying. In any case we will issue receipts to the names of other people or society.

**AFTER FULL PAYMENT GIVE RECEIPT TO (COMPULSORY FIELD):**

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THE FOLLOWING FORM WOULD BE RETURNED TO THE MOTO CLUB SARDEGNA. YOU NEED TO FILL IN ALL ITS PARTS, TO SIGN THE FORM AND ATTACH THE FOLLOWING DOCUMENTS: **RECEIPT OF PAYMENT (it's required to dispatch a copy of the bank transfer by fax with the number of the operation C.R.O.) MEDICAL FORM, PHOTO, YOU ALSO HAVE TO SEND: CURRICULUM + PHOTO by mail to: info@rallydisardegna.org**

I declare that the present form is correct. However, I declare to know the regulations of the race and to accept the conditions without reserve. I raise in advance the organizers for any responsibility civil and or penal in case of bodily or material accident.  
 We express, our full consent, in compliance with the provisions of Law 196/ 2003, about disposals for the protective measures of people and other subjects, for what concern the treatment of the personal datas. They could be used for the performance of the contract requested by the law.

DATE: \_\_\_\_\_, \_\_\_\_/\_\_\_\_/\_\_\_\_

SIGNATURE \_\_\_\_\_