

ENTRY FORM

ENTERED CAR

Make & Model : _____ Year: _____ Cubic CC: _____ cc

Touring GTS GTP Two-seat racing car Preferred race number: _____

I confirm the sound level of my car is maximum 108 dB on the track

DRIVER 1

DRIVER 2

Name:
& First name

Address:

Nationality:

Licence N°:

Birth Date :

Mobile:

e-mail:

ENTRY FEE : 650 € per car

By bank transfer in Euro : ING BANK • Rue de Herve, 106 • 4651 HERVE-BATTICE • Belgium
IBAN : BE16 3400 3600 0374 • BIC : BBRUBEBB

VISA Card holder name: _____

EUROCARD Card number: _____

MASTERCARD Exp. date : _____

3 digits security : _____

Date:

Signature:

You will receive by e-mail a written confirmation of your entry as well as the practical details of the meeting.