



Confirmed

Latvian AF Racing Commission

Lithuanian ASF Racing
Commission

Estonian ASU Racing
Committee

2004 BALTIC TOURING CAR AND FORMULA CHAMPIONSHIP EVENT ENTRY FORM

FILL ONLY IN CAPITAL PRINT LETTERS

Event Nr.

Country: Lithuania....., Latvia....., Estonia.....

Date of filling: 2004 m.d.;

The entry form received and fee payed: _____
date (filled by organiser)

Team name _____

Start Nr _____

COMPETITOR: Full company name _____

Company code _____ Country of residence _____

Address _____

Phone _____ Fax _____

e-mail _____ License# _____

Representative's name, surname _____

Representative's phone, mob. phone _____

DRIVER

Name, surname _____

License # _____ Address _____

mob.phone _____ e-mail _____

CAR

Class _____ Car Manufacturer _____

Model _____ Homologation No. _____

Engine make _____ Cylinder capacity _____

I WISH TO REGISTER SPARE CAR

Car Manufacturer _____ Model _____

Homologation No. _____

Engine make _____ Cylinder capacity _____

We, the Applicant, hereby apply to enter the 2004 Championship Event: We confirm that we have read and understood the provisions of the International Sporting Code and Championship sporting and technical Regulations and we agree, on our own behalf and on behalf of everyone associated with our participation in the 2004 Championship, 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 event organiser in writing at least within 2 days before the event so that the organiser may reappraise our entry.
PLEASE NOTE THAT FAILURE TO NOTIFY THE ORGANISER OF ANY CHANGES MADE TO THE DETAILS SUPPLIED ON THIS FORM MAY RESULT IN YOUR EXCLUSION FROM THE EVENT.

DRIVER

.....
(SIGNATURE)

.....
(NAME AND SURNAME OF THE DRIVER)

COMPETITOR'S REPRESENTATIVE

.....
(SIGNATURE)

.....
(NAME AND SURNAME OF THE REPRESENTATIVE)