





## **ENTRY FORM**

## INTERNATIONAL CZECH DRAGBIKE CHAMPIONSHIP **FIM Europe OPEN**

	11111 231	<b>5PC 01 LIV</b>		
ame of Event	DRAG DAY II - INTERNATIONAL CHAMPIONSHIP		STARTING NUMBER	
Place of Event	Hoškovice – Mnichovo Hradiště			
Date	14. – 15. September 2013			
Event Number	AČR 210/203, EMN 11/103			
	ENTRY FEE (including insurance):	85 € - You pay cash on	the scrutineering !!!	
RIDER:				
NAME:				
SURNAME:				
ADDRESS:				
phone No: , e-mail:				
Licence No.: , Type of licence:* national  international  FIM Europe				
Licence sponzor No.: , Team: , www.				
CLASS *:				
			ER * (CXX)	
STREET TWIN ET (2XX)		VRD TG PSB	FB STTF TFB	
PRO STREET	(3XX)			
MODIFIED STREE	` ' =			
SUPER STREET BIKE (SSB) (5XX)		CARS:		
JUNIOR DRAGSTER 50 (JXX)		SUPER STREET ET12		
TEENAGER DRAGSTER 125 (TXX)		SUPER GAS ET9,9		
NATIONAL DRAGSTER (NXX)		301 211 373		
BIKE / CAR:				
DIKE / CAK.	serial			
BIKE / CAR typ	speciál speciál	ENGINE / mark		
	special	Capacity		
Produced by		No cylinders		
Body / type		fuel		
Name of vehicle		Weight	kg	
		Boost*		
		without supercha	rger turbo N <sub>2</sub> O	
Best time:	1/4 sec	Top speed: 1/4	km/h	
	1/8 sec	1/8	km/h	
Rider confirms by his own signature at this entry form to be insured according to ACCR, FIM Europe and FIM rules for amount published at these rules.  The participants as per article 60.1 in an official event relieves the FIM, the FMNR, the organizers and the officials, their employees and officers and agents, from any and all liability for any loss, damage or injure which may incur in the course of an official event or the training therefore, subject always to article 110.3 of the ACCR Sporting Code.  Furthermore, the participant undertakes to responsibility and confirms to ACCR, organizers and officials, the employees, officers and agents his full responsibility to				

third parties for any loss, damage or injury for which he is partly or fully liable. In case of injury occurred or found during the event, where injury needs medical checking to continue in motorcycling competition, the undersigned – considering the danger risked also to third parties – discharges the Doctors of their obligation to professional secrecy towards the FMNR, resp. towards the officials responsible (Doctor of the event, Clerk of the Course, Sporting Stewards) working at the event.

Date	Signature

<sup>\*)</sup> selected tick