<u>Declaration of Indemnity</u> Fill in and hand in at the administrative check

	Passport No. Start Number
	hereby confirm that: entheld on
	ce) voluntarily and at my own risk and I am aware that I can
participate under the condition	
	f relevant class authorizing me for driving the motor vehicle with
which I am taking part in the ab	ove mentioned sport event.
3. I have a health insurance card.	
	my side in connection with my participation I will not claim
damages from the organizer.	l mana sum dam tha influence of aloch all amounts other addictives substance.
•	I race under the influence of alcohol or any other addictive substance;
	ndangering substances during the race.
* *	ehaviour of the whole escort including family members who will be
in the paddock area.	
	ned about the regulations of this sport event and I will comply
to them.	
Dlaga: Data:	
Place: Date:	
	signature
	Signature
	Declaration of Indemnity
Fill	I in and hand in at the administrative check
	Passport No Start Number
	hereby confirm that:
	entheld on
	ce) voluntarily and at my own risk and I am aware that I can
participate under the condition	I am in good health.
2. I have a valid driving licence of	f relevant class authorizing me for driving the motor vehicle with
which I am taking part in the ab	pove mentioned sport event.
3. I have a health insurance card.	
4. In case of financial damage on	my side in connection with my participation I will not claim
damages from the organizer.	
	race under the influence of alcohol or any other addictive substance;
•	ndangering substances during the race.
	ehaviour of the whole escort including family members who will be
in the paddock area.	chaviour of the whole escort including family incliners who will be
	chaviour of the whole escort including family inclineers who will be
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7. I have been thouroughly inform	ned about the regulations of this sport event and I will comply
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7. I have been thouroughly inform to them.	ned about the regulations of this sport event and I will comply
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