





<u>"XI° EDIZIONE ADRIATIC CUP</u> <u>F2 UIM WORLD CHAMPIONSHIP</u> JUNE 28 – 28, 2024 BRINDISI – Italy

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ENTRY FORM

DRIVER

Family name	First name
Date of birth	Place of birth
Blood group	
Country Address	
E-mail	
Phone	
Fax	
National license # Issued by	
Date of Issue:	
BOAT Hull manufacturerYear of Make	Boat HIN number
Engine make	
Race number	Class
I hereby confirm that the information contained herein is correct. I will c	conform to the rules and regulations of the

U.I.M., National Authority and Local Organizer. I assure that all members of my teams, its sponsors, and other such acquainted persons will be governed by the same rules as previously expressed. By signing this Entry Form, the driver confirms that participation in the above mentioned events for him/her and any other person connected or being the member of his/her team is under their own risk and responsibility

Signature

Date

APPROVED BY THE DRIVER'S NATIONAL AUTHORITY

Date







BRINDISI 28-29-30 June 2024 F.2 WORLD CHAMPIONSHIP

Please be informed that due to the new financial provisions in Italy we can't anymore pay cash anything.

So the travel money relevant to F.4 could be paid only through bank transfer of the relevant driver the Tuesday or Wednesday after the race.

Please write clearly (in block letters) your bank details, filling this form.

SURNAME
NAME
BANK
ACCOUNT HOLDER
IBAN
BIC

If you don't have the above details with you, please send them by e-mail to the following address.

circolonauticoportadoriente@gmail.com

Thank you very much for your understanding.

Driver's signature



FEDERAZIONE ITALIANA MOTONAUTICA

LIABILITY FORM

Event:		
Date/Place:		
Driver Surname	Driver Name	
Bornin	DateofBirthResident in	
Street	N°PostCode	
Email	PhoneNumber	
RacingNumber	Category	

The completion of this form is necessary to be included in the list of starters.

By signing this form, we acknowledge the current Sporting Standards (R.S.M.), for the current year of the FIM, as well as the organizational rules is sued by the Federation itself.

By signing this form, in consideration of the concrete methods of carrying out the event, we undertake to hold unharmed the FIM, the LOC (Local Organizing Committees) from any liability arising from the following:

- Fordamagesofanykindsufferedbytheteam,thepilotand/orthehull
- For damages of any kind, suffered by third parties, whether they are spectators or members of the organization in addition to the limits established by the RC policy (€ 10,000,000.00).

By signing this form, we commit ourselves to:

- 1. Takenoteoftherulesandprecautionstobeobservedbythosewhousethefieldrace/circuit/pathandthe relatedstructuresinwhichthetendersareheldandtoacceptthemunconditionally;
- 2. Takenoteofalltheconditionsinforcefortheuseoftherace/circuit/courseinwhichtheindividualraces willtakeplaceandtoacceptthemunconditionally;
- 3. DonotallowanyoneotherthanthepilotindicatedintheregistrationformsdeliveredtotheFIMtotravelthe race/circuit/routefieldwiththemeansindicatedonthesameregistrationform;
- 4. Wearappropriateclothingandprotections;
- Taketothetrackonlyifinperfectphysicalandmentalhealth,raisingtheFIMandtheLOC(LocalOrganizing Committees) from any responsibility for any physical problems that may occur during the course of the activity;
- 6. Donotgivetoanyoneelseanydocumentortitlevalidforaccesstothestructureandtothecompetition field,assuming,intheeventofnon-compliance,anyconnectedliability,alsoforanydamagethatmaybe necessary to thirdparties

WecommitourselvestothecompensationforanydamagecauseddirectlyorindirectlytotheFIM,tothestructures oftherace/circuit/coursefield,totheotherdriversandtheirvehicles,tothirdparties,whethertheyarespectators ormembersoftheorganization, over the limits established by the RC policy (€ 10,000,000.00).

Date____/___/____/

Driver'sSignature_







DRY PITS

Driver
class Race Number
Full Lenght
Full Width
Registration Number
Truck Driver Mr
Full Lenght
Full Width
Registration Number
Camper Driver Mr
Full Lenght
Full Width
Means of transport of Boats will be located in the assigned space.
Each Team will have right at one only assigned space.
Date Driver Signature
Please return to: circolonguticoportadoriente@amail.com

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