## TEAM ENTRY FORM 2019



2	RANKING: ☐ PRO ☐ CORPORATE
I I	NATIONS CUP ELIGIBLE: YES NO
7	(all driver nationalities the same)

DATE

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Ĕ	TEAM NAME:					RACES ENTERED:	
	TEAM MANAGER NAME:		NATIONALI	TY: BIRTHDAY:	UND	Round 1: 12hr (1 March 2019)  Round 2: 600laps (26 April 2019)  Round 3: 700km (TBC October 2019)	
5					Q2	☐ Round 3: 700km (TBC Oc ☐ Round 4: 24hr (TBC Dece	-
		NAME:	NATIONALITY:	DRIVER LICENSE NO.:	PHONE NUMBER	R: BIRTHDAY:	AGE:
DRIVERS INFO	DRIVER CAPTAIN						
	DRIVER						
	DRIVER						
	DRIVER						
	DRIVER						
	DRIVER						
	DRIVER						
	DRIVER						
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	PROGRAMME, PLEA  ☐ TEAM & SPONSO  EPS or Al format  ☐ 1 TEAM PHOTO  You may submit		Round 1 (AED 8,850)				
	☐ A LIST OF YOUR F	PIT CREW	IBAN No. AE78	80260001011157693601	EXPIRY DATE:		

A LIST OF YOUR PIT CREW Names and nationalities. ☐ I am authorized to make payment on behalf of the Team; I acknowledge and agree that the Team will be bound by PRINT NAME ☐ TEAM DESCRIPTION these terms; I acknowledge, without limitation, that all 150 words or less. Longer text will be edited. funds must be received prior to participation. SIGNATURE