



CYPRUS AUTOMOBILE ASSOCIATION
21 Amfipoleos Str., Office B126, CY-2025 Nicosia, Cyprus
Tel. +357 22313233 Fax +357 22313482
E-mail caa@cylanel.com.cy -- <http://www.cyprusrally.com.cy>

CYPRUS RALLY
18-20 October 2024



(For official use)
Competition No.

Fees settled ☐

Date: _____

INDIVIDUAL ENTRY FORM

COMPETITOR DETAILS

COMPETITOR		FIRST DRIVER	CO-DRIVER
Competitor name			
Surname			
First (given) Name			
Date of Birth			
Nationality (as licence)			
Passport or ID number			
Address	Street		
	City		
	Post Code		
	Country		
Correspondence Address (choose only one)		<input type="checkbox"/>	<input type="checkbox"/>
Telephone No. (business)			
Telephone No. (private)			
Mobile Tel. No.			
Fax No.			
E-mail address			
Competition Licence No.			
Issuing ASN			
Driving Licence No.			
Country of Issue			
Team Manager/Coordinator (name & surname)			
Telephone No. (business)		Mobile Tel. No	
E-mail address			

DETAILS OF THE CAR

Make		Registration No.	
Model		Cubic Capacity - CC	
Year of Manufacture		Chassis No.	
Group / Class		Engine No.	
Homologation No.		Predominant Colour	
Country of Registration		Technical Passport No.	

TYPE OF ENTRY

PRIVATE	<input type="checkbox"/>	LEGAL	<input type="checkbox"/>
---------	--------------------------	-------	--------------------------

ENTRY FEES

ENTRY FEES (please tick corresponding amount of appropriate entry fees)	PRIVATE ENTRANT		LEGAL ENTRANT	
With Optional Advertising received up to 30/08/2024	€1.700,00	<input type="checkbox"/>	€1.950,00	<input type="checkbox"/>
With Optional Advertising received after 30/08/2024 and before 10/09/2024	€1.950,00	<input type="checkbox"/>	€2.100,00	<input type="checkbox"/>
Without Optional Advertising received up to 30/08/2024	€1.900,00	<input type="checkbox"/>	€2.100,00	<input type="checkbox"/>
With Optional Advertising received after 30/08/2024 and before 10/09/2024	€2.400,00	<input type="checkbox"/>	€2.500,00	<input type="checkbox"/>

PAYMENT DETAILS

<p>The entry fees must be paid by bank transfer to the organiser's bank account as follows:</p> <p>Bank: HELLENIC BANK Account name: Cyprus Automobile Association Account no.: 116-01-040105-01 IBAN: CY25 0050 0116 0001 1601 0401 0501 SWIFT BIC: HEBACY2N</p>	<p><u>Note:</u></p> <ul style="list-style-type: none">➤ VAT amount of 19% is included in the entry fees➤ Entry forms must be accompanied by details of entry fee bank transfer➤ Unpaid entries will be considered invalid➤ The organizer must receive a receipt of entry fees paid to the entrant's ASN or details of a bank transfer.
---	---

SCORING OF POINTS

Please tick title for which you wish to score points

FIA MIDDLE EAST RALLY CHAMPIONSHIP <input type="checkbox"/>	CYPRUS NATIONAL RALLY CHAMPIONSHIP <input type="checkbox"/>
---	---

SEEDING INFORMATION

Name of First Driver:			Car Make & Model:			Class:	
Current FIA Priority	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Previous FIA Priority	YES <input type="checkbox"/>	NO <input type="checkbox"/>	YEAR	
Current National Seeded	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Previous National Seeded	YES <input type="checkbox"/>	NO <input type="checkbox"/>	YEAR	
Title of any Championship won							

PREVIOUS RESULTS

INTERNATIONAL				POSITION		FINISHERS
YEAR	EVENT	CAR	GROUP	O/A	CL	No.
NATIONAL				POSITION		FINISHERS
YEAR	EVENT	CAR	GROUP	O/A	CL	No.

DECLARATION OF INDEMNITY

The undersigned Competitor/Driver/Co-driver of the car entered for the Cyprus Rally 2024 declare that my participation is at my own risk and that I will not hold the Organiser, its Officials, the FIA and, the Cyprus Automobile Association responsible for any accidents, injuries etc during the Rally. I also declare to have full knowledge of the rules and regulations issued by the FIA and the CAA covering and governing motor racing in all its aspects and guarantee to respect all such rules and regulations, without exception. All statements made by me in this entry form are accurate.

ACKNOWLEDGEMENT AND AGREEMENT

By my signature I declare that all the information contained on the Entry Form is correct and that I acknowledge and agree in full to the terms and conditions of the above indemnity and, that I accept all the terms and conditions relating to my participation in this event.

ASN Stamp*	Signature of Entrant	Signature of First Driver	Signature of Co-Driver	Date
------------	----------------------	---------------------------	------------------------	------

Note: *or make sure letter from the entrant's ASN authorising and approving the entry, is attached herewith