



MODULO REGISTRAZIONE ELICOTTERI - HELICOPTERS REGISTRATION FORM

IL MODULO DEVE ESSERE INVIATO A: - SEND YOUR DETAILS TO: e-mail: e.dilauro@rallyitaliasardegna.com

| | |
|--|--|
| OWNER | |
| COMPANY NAME | |
| ADDRESS | |
| PHONE | |
| MAIL | |
| PILOT | |
| NAME | |
| ADDRESS | |
| PHONE | |
| MAIL (all info will be by e-mail) | |
| ADDRESS DURING THE EVENT | |
| HELICOPTERS' REGISTRATION | |
| TAPE AND MAKE | |
| COLOUR | |
| OPERATION | |
| WHAT WILL BE THE USE OF THE HELICOPTER ON THE RALLY? | |
| OVERNIGHT PARKING LOCATION | |
| FLYING UNDER CONTRACT FROM | |
| NAME | |
| ADDRESS | |
| PHONE | |
| POSSIBILITY FOR PATIENT TRANSPORT? | |

IL MATERIALE POTRÀ ESSERE RITIRATO PRESSO IL RALLY OFFICE DA GIOVEDÌ 30 MAGGIO 2024
MATERIALS CAN BE COLLECTED AT THE RALLY OFFICE STARTING FROM THURSDAY MAY 30 2024

Entry Fee:

€ 2.500 + VAT 22%

Banca - Bank:

BNL Gruppo BNP Paribas

Intestatario - Account:

ACI Sport spa

BIC - SWIFT:

BNLIITRR

IBAN:

IT65Q0100503211000000000034

Causale obbligatoria

RIS24 Registrazione Elicotteri

Reason for payment (compulsory):

RIS24 Helicopter Registration Fee

I, the pilot of the above helicopter, agree to follow the rules notified to me during the Rally.

Date

Signature