

Name of Event:



Event Date:

## **APPENDIX A: 2017 REGISTRATION FORM**

<b>RIDER</b>						
Family Name:			Requested Racing Number:			
First Name:			Assigned Racing Number:			
Address:			Date of birth:			
Postal Code:		City:	Country:			
Contact Number:			E-mail:			
National Federation:			National License Number:			
<b>REGIS</b>	TRATION TYPE					
	☐ ABP Contracted Rider		☐ 'Single event' rider (Early bird fee 200€/ Normal fee 250€)			
<b>UIM S</b> I	UPERLICENSE					
	Yearly Superlicense		Yearly Superlicense Number:			
	Request for 'Single event' Superlicense (50 EUR)					
INSUR	ANCE					
		Samuel Communities and		l . T	Community National Authority	
	Yearly Insurance Cover with Superlicense			☐ Yearly Insurance Cover with National Authority <sup>3</sup>		
	Request for 'Single event' Insurance Cover (75 EUR)					
	note that in this case, sibility insurance provid		oon Registra	ition, a copy of	your valid attestation of Civil	
CATEG	ORY					
	Runabout <b>GP1</b>			Freestyle		
	Ski Division <b>GP1</b>			Ski Division L	adies <b>GP1</b>	

To be filled in ALL PARTS and sent by e-mail to: info@aquabike.net















