

## REGISTRATION FORM - FIM TOURING WORLD CHALLENGE

On arrival, participants who want to compete in the FIM International Touristic Meeting Challenge shall visit the Welcome/Administrative Centre at the meeting with **their motorcycle and present a copy of their FMN/Club membership document and a copy of an ID document** to the FIM CTL Official.

|   |   |   |            |   |
|---|---|---|------------|---|
| <i>Please use block letters. Insufficiently filled in forms will be refused.</i>  |   | National Federation (FMN)   | Touring ID | Advantage Card #<br><span style="color: red;">Required</span> |
| Rider's family name<br><span style="color: red;">Required</span>  | Rider's first name<br><span style="color: red;">Required</span>               | Date of birth (dd/mm/yyyy)<br><span style="color: red;">Required</span> |            | Gender<br><br>Male<br>Female                                  |
| Email<br><span style="color: red;">Required</span>  |   | * use my email for sending additional information regarding FIM Touring |            |   |
|   |   | Yes   | No         |   |
| Participating as:<br><span style="color: red;">Required</span>  | Individual<br>OR<br>Motorcycle club member (enter Motorcycle Club name below) |   |            |   |
| Name of Motorcycle Club   |   |   |            |   |
| Motorcycle Rental<br><span style="color: red;">Required</span>  |   | Personal Motorcycle<br><span style="color: red;">Required</span>        |            |   |
| Model   |   | License Plate   |            |   |
| I, the undersigned, declare that I have read the Code, the TWC rules and the Supplementary Regulations and I accept and shall comply with them.<br><i>Je, soussigné, déclare que j'ai lu le Code, les règles du TWC et le Règlement Particulier et je les accepte et je le respecterai.</i> |   |   |            |   |
| Date / Date   | Signature of participant<br><span style="color: red;">Required</span>         |   |            |   |
|   |   |   |            |   |

### FIM RESERVE

|                                      |              |                |  |
|--------------------------------------|--------------|----------------|--|
| Event's Name                         |              |                |  |
| Event's Date                         | From:        | To:            |  |
| Name and Signature<br>FIM's Delegate |              |                |  |
| Participant's                        | Arrival Date | Departure Date |  |
| Motorcycle data validation           | Correct      | Not Correct    |  |
| Delegate's Note                      |              |                |  |