

QATAR TOURING CAR CHAMPIONSHIP 2020 REGISTRATION FORM

RACING NO.

DRIVER

SURNAME	NAME
PO BOX	TOWN & COUNTRY
DATE OF BIRTH (day/month/year)	NATIONALITY
PHONE & MOBILE	EMAIL
RACING LICENSE NUMBER	ASN
DRIVING LICENSE	VALIDITY
AUTHORISATION TO RACE	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5

COMPULSORY DOCUMENTATION TO BE PRESENTED

<input type="checkbox"/> ASN License + Start Permission	<input type="checkbox"/> Driving License	<input type="checkbox"/> Vehicle insurance
<input type="checkbox"/> ID Card	<input type="checkbox"/> Vehicle Registration	<input type="checkbox"/> Authorisation letter from the owner

CAR

MAKE	MODEL	CC
SERIAL NUMBER	YEAR	COLOUR

Information

History of Car

Awards and Achievements

Instagram- FaceBook- Twitter-

CHAMPIONSHIP - RACES

QTCC Races	<input type="checkbox"/> ALL CHAMPIONSHIP	<input type="checkbox"/> WILD CARD <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
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ENTRY FEE

<input type="checkbox"/> ALL CHAMPIONSHIP <input type="checkbox"/> QAR 5.000	<input type="checkbox"/> WILD CARD <input type="checkbox"/> QAR 2 500	<input type="checkbox"/> DEPOSIT <input type="checkbox"/> QAR 1 500
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* Price includes in the pit box (following availability) 4 chairs, 2 tables and 1 TV; 3 plate No, transponder and resu



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PAYMENT

CREDIT CARD (Visa, Mastercard)

NAME:	EXPIRY DATE:
CREDIT CARD NO:	SIGNATURE

CASH *

* Payment will only be accepted in Qatari Ryals

PROOF OF PAYMENT:

Championship

WILD CARD				
1	2	3	4	5

Driver's Name: _____

Driver's Signature: _____

Date: _____

Qatar Motor & Motorcycle Federation
Lusail Sport Arena
PO BOX 8708 Doha . QATAR



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ACKNOWLEDGMENT

I have acknowledged that I have agreed at my absolute discretion and capacity to participate and compete at Losail International Circuit, Doha.

Also, I have acknowledged that I have reviewed the rules and regulations of the circuit & competition and accepted all terms and instructions thereof. Further, I have reviewed, accepted and undertaken all regulations and applicable international and local codes thereof. In addition to, I have checked and approved the race circuit, its structures, facilities, fence and all systems, flags and signals applicable therein.

Also, I have acknowledged in my full awareness that I have understood the high risk of competition at the circuit, all consequences, injuries, death and personal or other's damages that may arise thereof.

I have acknowledged that I have the ability to ride my motorcycle, drive my car or any other vehicle such as bicycle in full capacity and that my vehicle is in good condition to participate in the circuit for any activity including but not limited to sport training days, track days, practices, tests or races in respect of capacity, power, efficiency and all technical matters prescribed in this regard. I herein acknowledge and consent the use of any image taken during the championship to be published in platforms such as LCSC / QMMF social media channels and websites.

Therefore, I have acknowledged under the aforesaid acknowledgment that I shall hold all responsibility including criminal, civil, contractual, omissive or any other responsibility may result in the following:

1. My injury, death or damages that may occur to my car or motorcycle as a result of my error or third party's error including participants, competitors, staff, workers, organizers, referees, supervisors or officials of circuit or race, facilities or any other property thereof wherever the extent of error or description.
2. My injury or death arising from the medical, surgical, or clinical intervention by physicians, nurses, or paramedics in circuit, hospital, treatment unit to cure all accidents and emergencies occurred within the circuit or competition.
3. Looses and financial damages occurred in the circuit, facilities, tools, equipment or premises thereof as a result of intended acts, actions, or errors committed by me or any other competitor within the race or on the circuit and I shall be responsible for all compensation and fines imposed on me in this regard.

Therefore, I shall acknowledge under the previous acknowledgment that I or my successors shall not have the right to claim any compensation arising from injury, death or any material damages occurred to me, from the officials of circuit, circuit staff, referees, organizers, workers, supervisors, physicians, paramedics, nurses working in the circuit or hospital, representatives, competent authority, any administrative authority, local bodies, institutions or governmental bodies. Also, I or my successors shall not entitle in this matter to seek jurisdiction, courts of jurisdiction in all types; local, regional and international inside or outside Qatar, competent organizations, settlement committees or any other authority to claim any type of compensation due to my injury, death or any material damages occurred to me or to my car on the circuit.

Therefore, I have acknowledged that I have reviewed the above acknowledgment and accept in my absolute well and capacity, all provisions, undertakings and obligations thereof decimal and all and I have set my hand on each paper thereof with the reasonable form and text therein.



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PREFERRED NO

Driver's Name:

Driver's Signature:

Date:

The preferred Number will be given if possible