

ENTRY FORM

Rally New York USA
Liberty - Narrowsburg - Monticello, NY
April 7 - 8, 2006



Entry Fees:

Friday ESRC - \$ 590 if received by March 7 \$ _____
 Saturday ESRC - \$ 750 if received by March 7 \$ _____
 Both ESRC - \$1,090 if received by March 7 \$ _____
 USRC - \$1,190 if received by March 7 \$ _____
 USRC and ESRCx2 - \$1,350 if received by March 7 \$ _____
 Official Reconnaissance - \$ 275 if received by March 7 \$ _____
 only for crews not competing

Add Late Fee of \$250 after March 7 \$ _____

Total Enclosed \$ _____

NO REFUNDS after March 21, 2006

Course Notes prepared by the organizer and two awards dinner tickets (\$225 value) are included free of charge.

See Supplementary Regulations for discounts for Canadian and foreign entrants.

Paypal Payments: To account Eurorally@aol.com at www.Paypal.com

Payment by Check: Please make checks payable to *Rally New York, Ltd.*

Please mail checks and entry forms (entry forms may be faxed) to:

Rally New York USA
2488 Route 42
Forestburgh, New York 12777 USA

Tel. 845-794-4096 Eurorally@aol.com
 Fax 845-794-4098 www.RallyNewYork.com

	ENTRANT	DRIVER	CO-DRIVER
Team Name			
Last Name			
First name			
NASA Membership #			
Nationality (as Passport)			
Postal address Indicate address where ALL correspondence is to be sent (1, 2, or 3 - list only one address please)	1.	2.	3.
Telephone No. (business)			
Telephone No. (private)			
Mobile Telephone No.			
Fax No.			
E-mail Address			
Team Website Address			
Competition License No.			
Type of License (FIA, NASA, USAC, etc.)			
Issuing ASN (FIA/Internt'l)			
Driving License No.			
Country of Issue			

DETAILS OF THE CAR

Make	Registration No.	
Model	C.C.	
Year of Manufacture	Body No.	
Group / Class	Engine No.	
Homologation No.	Predominant Color	
Country of Registration	Logbook No.	

SEEDING INFORMATION

Driver _____

Car _____ Group / Class _____

FIA Priority A YES / NO FIA Priority B YES / NO

Previous FIA, Regional, or National Seed YES / NO

If yes, Region: _____ Year: _____ Seed: _____ Priority: _____

Championship Winner? YES / NO

If yes, name Championship: _____ Year: _____ Place: _____

	Year	Event	Car	Group	O/A Position	Class Position	No. of Finishers
Intern't'l							
National							
Other							

In case of emergency, contact:

For Driver: _____ Phone: _____

For Co-Driver: _____ Phone: _____

List any medical conditions we should be aware of:

Driver: _____

Co-Driver: _____

ACKNOWLEDGEMENT AND AGREEMENT

By signing this form, I declare that all the information contained on the entry form is correct. I acknowledge and agree in full to all terms and conditions relating to my participation in this event, as stated in the Supplementary Regulations and all other relevant Rules and Regulations.

For Entrant: _____ Name/Title: _____ Date: _____
Signature

Driver: _____ Co-Driver: _____ Date: _____
Signature Signature