



ENTRY FORM

DRIVER:

Family Name: _____ First Name: _____

Date of Birth: _____ Place of Birth: _____

Blood Group: _____ Country: _____

Address: _____

E-mail: _____ Phone: _____

National License # _____ Issued by: _____

Date of Issue: _____

RADIOMAN (must speak **fluent** English):

Family Name: _____ First Name: _____

Date of Birth: _____ Place of Birth: _____

Blood Group: _____ Country: _____

Address: _____

E-mail: _____ Phone: _____

Radio Frequency: _____ Radio Brand/Model: _____



BOAT:

Hull Manufacturer: _____ **Year of Make:** _____

Engine Make: _____ **Race #:** _____

Hull Identification Number (HIN): _____

I hereby confirm that the information contained herein is correct. I will confirm to the rules and regulations of the U.I.M., National Authority and Local Organizer. I assure that all members of my teams, it's sponsors, and other acquainted persons will be governed by the same rules as previously expressed. By signing this Entry Form, the driver confirms that participation in the above mentioned events for him/her and any other person connected or being the member of his/her team is under their own risk and responsibility.

Driver's Signature: _____ **Date:** _____

APPROVED BY THE DRIVER'S NATIONAL AUTHORITY

Signature: _____ **Date:** _____

NATIONAL AUTHORITY STAMP

Please, for your own publicity, include the following:

- ✓ Racing CV
- ✓ Photo of Driver
- ✓ Photo of Boat

Please return to: fpm@fpmotonautica.org



DRY PIT SPACE REQUIREMENTS FORM

DRIVER/TEAM: _____

CLASS: _____ RACE NUMBER: _____

NO TRUCKS, CARS OR TRAILERS WILL BE ALLOWED TO STAY AT THE PIT AREA

Means of transport of Boats will be **allocated** in the assigned space.

Each Team will have right at **only** one assigned space.

It's **forbidden** to sleep on the PIT Area.

TRUCK - TRAILER (max. 6m x 9m or 9m x 6m)

Full Length: _____ (in metres)

Full Width: _____ (in metres)

Registration N^o: _____

Truck Driver: _____

TENT (max. 6m x 9m or 9m x 6m)

Full Length: _____ (in metres)

Full Width: _____ (in metres)

Driver's Signature: _

Date: _____

Please return to: fpm@fpmotonautica.org

Download from: www.motorbootrennsport.de



BANK DETAILS FORM

Please write clearly **(IN BLOCK LETTERS)** your bank details, filling this form.

NAME: _____

SURNAME: _____

BANK: _____

ACCOUNT HOLDER: _____

IBAN: _____

SWIFT: _____

If you don't have the above details with you, please send them by e-mail to the following address: fpm@fpmotonautica.org

Thank you very much for your understanding.

Signature: _

Date: _____

2021 UIM ANTI-DOPING CONSENT FORM

I, as a member of [National Federation] _____,
and/or a participant in an event authorized or recognized by [National Federation or UIM]
authorized or recognized event, I hereby declare as follows:

I acknowledge that I am bound by, and confirm that I shall comply with, all of the provisions of the UIM Anti-Doping Rules (as amended from time to time), the World Anti-Doping Code (the "Code") and the International Standards issued by the World Anti-Doping Agency, as amended from time to time, and published on WADA's website.

I consent and agree to the creation of my profile in the WADA Doping Control Clearing House ("ADAMS"), as requested under the Code to which UIM is a Signatory, and/or any other authorized National Anti-Doping Organization's similar system for the sharing of information, and to the entry on my Doping Control, Whereabouts and Therapeutic Use Exemptions related data in such systems.

I acknowledge the authority of UIM [and its member National Federations and/or National Anti-Doping Organizations] under the UIM Anti-Doping Rules to enforce, to manage results under, and to impose sanctions in accordance with the UIM Anti-Doping Rules.

I acknowledge and agree that any dispute arising out of a decision made pursuant to the UIM Anti-Doping Rules, after exhaustion of the process expressly provided for in the UIM Anti-Doping Rules, may be appealed exclusively as provided in Article [3] of the UIM Anti-Doping Rules to an appellate body for final and binding arbitration, which in the case of International-Level Athletes is the Court of Arbitration for Sport(CAS).

I acknowledge and agree that the decisions of the arbitral appellate body referenced above shall be final and enforceable, and that I will not bring any claim, arbitration, lawsuit or litigation in any other court or tribunal.

I have read and understand the present declaration.

Date

**Date of Birth
(Day/Month/Year)**

Print Name (Last Name, First Name)

**Signature (or, if a minor, signature of
legal guardian)**