

CONCOURS D'ELEGANCE & LUXEMBOURG CLASSIC DAYS Parc Domaine Thermal, Mondorf-les-Bains

























SUBSCRIPTION FORM

Concours d'Elegance - 29 & 30 August 2015

Read suscription form with Adobe Reader

Please send your completed form to:

MAW Events sarl 30, rue de l'Industrie L-8069 STRASSEN Luxembourg

OR info@concours-mondorf.lu

BEFORE 15 JULY 2015.

Please fill in the form I	elow in CAPITAL LETTERS. BEFORE 15 JULY 2015.
PARTICI	PANT
Name:	First Name:
Postal Address:	City:
Postcode:	Country:
Phone:	Fax:
Email:	

OPTIONAL EXTRAS	BASIC PACKAGE
SUPPLEMENTARY MERCHANDISE HIGH QUALITY SWEAT-JACKET (60 € each) Size SMLXLXXL (Please tick) N° of high quality sweat-jackets A	Subscription fee: 1 or more vehicles 1 diner "l'Orangerie" (Saturday) 1 lunch "l'Orangerie" (Sunday) 1 high quality sweat-jacket S M L XL XXL 1 goodybag.
SUPPLEMENTARY PASSES (120 € each) Included: Free entrance 1 diner "l'Orangerie" (Saturday) 1 lunch "l'Orangerie" (Sunday) No of supplementary VIP PASS B	TOTAL = A+B+C I have transferred the total amount of:€ IBAN: LU90 0019 4055 5413 5000, BIC: BCEELULL to the account of Make-A-Wish:

Legal Responsibility

The organizer rejects any liability for damage to persons, property and assets that happens to the participants (applicants, drivers and co-drivers) before, during and after the event. By introducing the participation form the participants renounce, for themselves and their relatives, for any damage suffered resulting directly or indirectly from the event, the right to act against or take recorse against the organizer Make-A-Wish and their employees and assistants, against administrations, service organizations and any other person that is in connection with the organization of the event. The participants renounce, for themselves and their relatives, on their right to take recourse to the courts. The participants take part in the event at their own risk and bear the civil and criminal responsibility for all damage caused by their vehicles.

DATE:	SIGNATURE (NAME):
D/(1L	SIGNATORE (NAME).

		Registrant No. (For Office Use)
VEHIC	CLE DESCRIPTION	
Owner	's Name	Start Number
Brand:		Coach Builder:
Model: Frame No:		
Year:	Engine Size:	HP: CYL:
FIA Pass:	No Yes No	FIVA Pass: No Yes No
Informa	ation to be given to the public about the vehic	le, driver and co-driver:
CLASS	Please tick	COLOUR PHOTO for publication

LOGISTICAL INFORMATION

Trailer parking required? Yes / No

IF YES, approximately what size?______ METRES