

REGISTRATION APPLICATION TO THE MILANO-TARANTO 2020

Send from to:

info@milanotaranto.it or Moto Club Veteran "San Martino" - via Orvieto, 2 - 06132 San Martino in Colle (PG)

Bank transfer to: MOTO CLUB VETERAN "SAN MARTINO" iban IT28Y0311103001000000001588 bic swift BLOPIT22

| | | |
|--|---------------------------------------|--|
| PARTICIPANT <input type="checkbox"/> | | |
| STORICA <input type="checkbox"/> | SPORT <input type="checkbox"/> | TASTER <input type="checkbox"/> |
| LE GLORIOSE <input type="checkbox"/> (to be filled in by the Organization) | | |
| Surname | | Name |
| Street | Number | City |
| Province | Code number | Phone |
| Place and date of birth | | CIF (tax identification number) |
| Club | Size t-shirt | E-mail |

| | | | |
|---|--|--|--|
| PASSENGER <input type="checkbox"/> | | | SUPPORTER with car <input type="checkbox"/> |
| SIDECAR <input type="checkbox"/> | CYCLECAR <input type="checkbox"/> | TASTER <input type="checkbox"/> | |
| Surname | | Name | |
| Street | Number | City | |
| Province | Code number | Phone | |
| Place and date of birth | | CIF (tax identification number) | |
| Club | Size t-shirt | E-mail | |

| | | | |
|--|---|---|--|
| MOTORCYCLE <input type="checkbox"/> | SCOOTER <input type="checkbox"/> | SIDECAR <input type="checkbox"/> | CYCLECAR <input type="checkbox"/> |
| Make | Model | Cylinder capacity | |
| Chassis number | Year of construction | Year of first registration | |

| | | | |
|---|-----------|--|--|
| ENTRANCE FEE (Art.7) | | | IMPORTANT |
| "Storica e Sport" (Motorcycle) | 1600,00 € | | Food allergies or intolerance _____ |
| "Storica e Sport" (Sidecar-Cyclecar) | 2400,00 € | | |
| "Taster" (Motorcycle) | 1700,00 € | | Please indicate who you would like to share the hotel room with (double or triple room) _____ |
| "Taster" (Passenger) | 1100,00 € | | |
| "Supporter" with car | 1000,00 € | | |
| EXTRA (Art.7) | | | Also included: |
| Single room supplement <small>(Only 5 available)</small> | 300,00 € | | Medical fitness certificate amateur sport |
| Baggage transport (directly to the hotel) from 2 nd and subsequent item(s) | 30,00 € | | Copy of the driving licence |
| ADDITIONAL SERVICES ONLY BY ADVANCE RESERVATION (until the 50 rooms available are taken) | | | Copy of the registration certificate |
| <u>Saturday 4 July</u> : Dinner, overnight accommodation with breakfast and late checkout at 3:00 p.m. on Sunday 5 July in two and three bedded room. | 85,00 € | | n. 2 photo of the motorcycle |
| <u>Saturday 4 July</u> : Single room supplement (only 5 available). | 30,00 € | | n. 2 photo of the participant |
| <u>Sunday 5 July</u> : late checkout at 8:00 p.m. on Sunday 5 th July - for a two or three bedded | 25,00 € | | copy of the identity document of the passenger/supporter |
| <u>Sunday 5 July</u> : late checkout at 8:00 p.m. on Sunday 5 th July - for a single bedroom. | 40,00 € | | n. 2 photo of the passenger/supporter |

I authorize the processing of personal data according to the art. 13 of Legislative Decree 196/2003 and art. 13 of EU Regulation 2016/679 concerning the protection of individuals with regard to the processing of personal data.

date _____

Signature _____

Certificate of Fitness for non-competitive sporting activities

Mr/Ms: _____

Born in: _____ on: _____

Resident in: _____

The individual, on the basis of a medical examination carried out by myself, including arterial blood pressure readings and ECG, carried out on _____, does not present any current contraindications to non-competitive sporting activities. This certificate is valid for one year from the date of issue.

Place, _____ Date, _____

The Doctor