



"55° Rally Elba CIRA – CRZ Trofeo Gruppo Gino 2022"

CREW/TEAM LIST

The Team list completed of all data and licence nr. must be sent within next 12/4/21 by email at the following address: acilivornosport@livorno.it.

<i>First Driver</i>	<i>Co-Driver</i>
NAME: _____	NAME: _____
SURNAME: _____	SURNAME: _____
MOBILE PHONE _____	MOBILE PHONE _____
LICENCE Nr. _____	LICENCE Nr. _____
COVID REFERENT	TEAM MEMBER
NAME: _____	NAME: _____
SURNAME: _____	SURNAME: _____
MOBILE PHONE _____	MOBILE PHONE _____
LICENCE Nr. _____	LICENCE Nr. _____
TEAM MEMBER	TEAM MEMBER
NAME: _____	NAME: _____
SURNAME: _____	SURNAME: _____
MOBILE PHONE _____	MOBILE PHONE _____
LICENCE Nr. _____	LICENCE Nr. _____
TEAM MEMBER	TEAM MEMBER
NAME: _____	NAME: _____
SURNAME: _____	SURNAME: _____
MOBILE PHONE _____	MOBILE PHONE _____
LICENCE Nr. _____	LICENCE Nr. _____

Attention: To avoid crowds and queues at the entrance, indicate who will be the person in charge of collection.

The only person in charge of collection Mr. _____ Mobil. N° _____

At the time of collecting the materials, for each person present in the form, a copy of the super green pass must be given to the covid-manager to demonstrate possession and original self-certification of driving license for each driver (must indicate the delivery date). By sending this list, we declare that all the people of the Team have read the procedures provided for in the "General Protocol to combat and contain the spread of the Covid 19 virus in motor sport"

Place of data _____ Company _____