Automotodrom Brno, a.s.,

company seated at Masarykův okruh 201, 664 81 Ostrovačice, Czech Republic, postal address: P.O.Box 1, 641 00 Brno, Company Registration Number: 60728825, VAT Number: CZ60728825, the company is registered in the Companies Register kept by the Regional Court in Brno, Sec. B, File No. 1451

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2024 FREE PRACTICE RIDER’S / DRIVER’S DECLARATION

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| --- | --- | --- | --- | --- | --- |
| **TEST MOTO** |  | **TEST AUTO** |  | **DATE** |  |

|  |  |
| --- | --- |
| RIDER / DRIVER **Name**:………………………………………..  **Date of birth**:………………………….……  **Address**:……………………………..….….  ……………………………………………….  ……………………………………………….  **Competition Licence Number**……….……..  **Mobile Phone**:………………………..……  **E-mail**:………………………………..…….. | VEHICLE **Make**:………………………………………..  **Type (formula, touring, sports)**:  ……………………………………………….  **Colour**  ……………………………………………….  **Start Number**……………………..….…….. |

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| I confirm with my signature to have read and comply with circuit regulations regarding free practices. I confirm that I am a holder of a corresponding competition licence. I agree to take part in these free practices entirely on my own risk and I assume criminal liability and civil liability for any damages caused to my vehicle and for any damages caused by myself to property of Automotodrom Brno, a.s. and of third parties, as well as responsibility for the behaviour of all persons accompanying me.  I declare that the vehicle used for this free practice is roadworthy and that it is safe both for me and my environs.  For case of my injury and transport to hospital I designate the following person:  Name:…………………………………………………………………………………………  Mobile phone number………………………………………………….……………………  who will ensure my personal identification documents, means of payment, spare clothing and in the hospital will arrange all requisites related to treatment, transport back to the circuit and/or repatriation.  **Consent to the disclosure of personal information:**  As defined in Article 7 of Regulation (EC) No 2016/67 of the European Parliament and of the Council of 27 April 2016 on the protection of individuals with regard to the processing of personal data and on the free movement of such data and repealing Directive 95/46 / EC (General Privacy Policy), I hereby grant Automotodrom Brno, a.s. my consent to process as my data controller for their needs my personal data above for the purpose of this Document and archiving it for 38 months. I further declare that I am aware of my authority. This consent may be revoked at any time by a written statement delivered to Automotodrom Brno, a.s.  I further undertake to comply with all extraordinary measures and recommendations of the Government of the Czech Republic, the Ministry of Health of the Czech Republic, the Regional Hygiene Station or other state administration bodies and Automotodrom Brno, a.s. related in particular to the spread of COVID-19. |

Date:…………………………………..

……………………………………

Rider’s / Driver’s Signature