*Only holders of other ASF licenses, who want to participate in LAKČ must fill it out*

**Annex Nr. 6 of the 2023 Lithuanian autocross championship (B-league) regulation**

**Championship (B-league) participant entry form**

1. Drivers, willing to participate in 2023 Lithuanian autocross championship (B-league) must to submit this entry form to the Lithuanian Cross Commitee and to pay defined fee to the event Organizer no later before the end of the administrative check.
2. Fee for the participant of Lithuanian autocross championship (B-league): 10 Eur.
3. The list of participants of the Lithuanian autocross championship (B-league) will be announced in website [www.lasf.lt](http://www.lasf.lt). (*Participant will be put in the list when the original entry form will be received and the fee paid.)*

|  |  |  |
| --- | --- | --- |
| **Select car class in which you will participate** | **X** | **in the free window, near the class.** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Tag** | ***Class*** | ***Classes (Article Nr.3.1. in the Regulation of the Lithuanian autocross B-league championship)*** | ***Start Nr.*** |
|  | **1600** | cars (min. 4 seated), engine capacity up to 1600 cm³, FWD, drivers with age from 16 years). | **101-199** |
|  | **2000** | cars (min. 4 seated), engine capacity up to 2000 cm³, FWD, drivers with age from 18 years. | **201-299** |
|  | **3000 RWD** | cars (min. 4 seated), engine capacity up to 3000 cm³, RWD, drivers with age from 18 years. | **301-399** |

**\* -** with permition of parents and with approval of Cross Comitee of LASF.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **DRIVER** | | | | |
| Name | |  | | |
| Surname | |  | | |
| Date of birth | |  | | |
| Address | |  | | |
| Postal code, city, country | |  | | |
| Mobile ph. nr., e-mail | |  | | |
| **CAR** | | | | |
| Make |  | | | |
| Model |  | | | |
| Preferred start number | | |  |  |
| **COMPETITOR** | | | | |
| Name |  | | | |

*I declare, that all given information above is correct.*

**Driver**  ............................................  **Year 2023** …...……..….........................

( *Signature ) ( Date )*

**Information:** **Send to:** The Lithuanian automobile sport federation

Tel. :+370 37 350026 Savanorių pr. 56, 44210 Kaunas, Lithuania

[www.lasf.lt](http://www.lasf.lt) Fax. +370 37 350026; +370 615 46710 [lasf@lasf.lt](mailto:lasf@lasf.lt)

|  |  |  |
| --- | --- | --- |
| Approval of LASF | .........................................  *entry form received (date)* | ...............................  *signature* |