

ENTRY FORM

TIMES WOMEN'S DRIVE 2018

28TH – 29TH April 2018

MUMBAI - GOA

Affix (3.5cm x 4.5cm) PHOTOS →	Driver	Navigator	Team Correspondent
DETAILS	DRIVER	NAVIGATOR	TEAM CORRESPONDENT
Surname			
First Name			
Middle Name			
Nationality			
Blood Group			
Date of Birth			
Residence Address			
Telephone - Res			
Mobile			
Email address			
PAN No.			
Driving License No./Issued At			
Driving License Valid Till			
Driving in Event	YES	YES / NO	YES / NO
2018 FMSCI Comp. Lic. No.		If Yes Above	If Yes Above
Emergency Contact Name			
Relation			
Emergency no. Landline			
Emergency No. Mobile			

VEHICLE DETAILS

(for these details please refer your RC Book/Smart Card/Insurance Policy certificate)

MAKE		REGISTRATION No.	
MODEL		COLOR	
MANUFACTURING YEAR		OWNER'S NAME	
INSURANCE Policy No.		VALID FROM /TILL	
INSURANCE COMPANY			

SPECIAL RALLY COVER INSURANCE

INSURANCE POICY NUMBER	COMPANY	VALID FROM	VALID TILL
		28/04/2018	29/04/2018

	ENTRY FEES	FMSCI LICENSE FEES
PAID ON DATE		(Refer www. http://licence.fmsci.co.in/ for online applications)
AMOUNT		
Payment Transaction Receipt/UTR No.		
DD/Pay Order No. Date/Bank Name/In Favor of if attached		

For OFFICIAL USE ONLY : CHECK LIST : Please Verify and Tick

- 3.5 cm x 4.5 cm size photos 2 copies (+1 AFFIXED) of each of Driver/Navigator/Team Correspondent – Attached
- Valid Driving License copies each of Driver/Navigator/Team Correspondent – Attached
- Indemnity Form Duly Signed by all – Attached
- Vehicle Registration Book/Smart Card copy – Attached
- Valid Normal Vehicle Insurance copy – Attached
- Valid Special Rally Insurance Cover – Attached
- Valid PUC (Pollution Under Control Certificate) – Attached
- 2018 FMSCI Competition License Copy or Fees Receipt Acknowledgement (For all participants who will be driving during drive)
No. of Licenses/Forms attached 1 2 3
- Authority letter from owner of the vehicle if the driver/navigator ORteam correspondent do not own the vehicle to be used in The Drive and/or the Event
- Entry Fees Payment Receipt/Transaction Acknowledgement copy – Attached
- Accepted Rejected **Remarks, if any :** _____

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 _____ Official Sign..... Date _____