CHOUETTE RALLYE 2024

APPLICATION FORM

*Yes, I hereby sign up for the CHOUETTE RALLYE which will take place 25 – 28 october 2024. I declare that my car complies with present regulations and is properly insure . I shall heed traffic rules and regulations and I shall not hold the organisation responsible in the unlikely event of an accident or collision. LEDORGA reserves the right to reject any applications that could endanger the friendly and leisurely character of this event as well as applications featuring vehicles that do not meet the selection criteria.*

Participation costs €***380***  per person in a double room or €***495*** per person in single room.

This application is considered settled on reception by LEDORGA of the full amount payable. Payment should be received ultimately on the **31th of july 2024**. I have read and accepted the cancellation policy on the Ledorga website.

Payment by international virment with IBAN & BIC sytem

bank account : LEDORGA. bank name : La Banque Postale

IBAN : FR80 2004 1010 1242 9302 1T03 393 BIC : PSSTFRPPSCE

.. personn(s) x €380( in double room ) *=* €

.. personn(s) x €495( in single room ) = €

TOTAL = €

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name |  |  |  |  |
| First Name |  |  |  |  |
| Address |  |  |  |  |
| Country |  |  |  |  |
| Phone |  |  |  |  |
| E-Mail |  |  |  |  |
| Allergic Food? |  |  |  |  |

Car (Make, type and year):

Your Place: date:

Signature (or Name & first name) :

*Please return this application form to: ledorga.contact@gmail.com*