ENTRY FORM - 4 JOURS DE TRIAL DE LA CREUSE 2026 : 44TH ÉDITION

Organiser : A.T.C. St CHRISTOPHE Dates : 11th to 14th July 2026

JITSIE

A.T.C. Saint Christophe

RIDER N°

MOTO FÉDÉRATION FRANÇAISE

LIGUE MOTO NOUVELLE AQUITAINE TRIAL

License Numbers (ACU, ADAC, FMB…): ..... **FIM** :.....

Or : you haven't got the ACU, FMB, ADAC…licence and you want take the "one event licence" - 85 € (must be downloaded before online) ?

☐ YES..... ☐ NO

Catégories (2 LAPS) : ❒ ELITE ❒ TR1 ❒ TR2+ ❒ TR2 ❒ TR3+ ❒ TR3 ❒ TR4+

Catégories plaisance (1 LAP) : ❒ TR2 ❒ TR3+ ❒ TR3 ❒ TR4+ ❒ TR4 ❒ VÉTÉRANS + DE 40 y/o ❒ VÉTÉRANS + DE 60 y/o

Spécification : ❒ Woman ❒ Vintage ❒ **Cadets 50cc / 14 to 16 y/o** ❒ **Juniors 125cc / 16 to 18 y/o**

Number of race days : ❒ 4 ❒ 3 ❒ 2 ❒ 1 day(s) **Dates :**……

You can only ride a bike on the road that you have the correct licence for. In the zones you may ride any sized trial bike

RIDER : **(Please write in CAPITALS LETTERS)**

SURNAME :.....**First Name** :.....

Date of Birth :...../...../.....

Address : **N°:** ..... **Road :** .....

Postal Code : ..... **Town :** .....

☎ : ..... **Country :** .....

E-mail (READABLE ☺ your confirmation will be sent by email) :

.....

Name of your Motorcycle Club :.....

Driver License : **Catégory :** ..... **N° :** .....**Obtaining :** .....

MOTO : **Make** :.....**Capacity** : ☐ 125cc ☐ 250cc ☐ cc

Your Motorcycle's license plate (Registration Number) : .....

ASSISTANT : **Only for Elites, TR1 and TR2+** **(Please write in CAPITALS LETTERS)**

SURNAME :.....**First Name** :.....

Date of Birth : ..../ ..../.....

E-mail (READABLE ☺ your confirmation will be sent by email) :

.....

Name of your Motorcycle Club :.....

License Numbers (ACU, ADAC, FMB…) : .....**FIM** :.....

Driver License : **Catégory :** .....**N° :** .....**Obtaining :** .....

MOTO : **Make** :.....**Capacity** : ☐ 125cc ☐ 250cc ☐ cc

Your Motorcycle's license plate (Registration Number) : .....

- **By signing below, I certify that I have read, understood and that i completely agree with all rules and regulations applied to the competition.**

I agree any photos or/and videos of myself could be used on a commercial purpose ☐ **Yes** ☐ **No**

I give an authorized person the right to take any decision concerning any medical act ☐ **Yes** ☐ **No**

YOU WANT TO RIDE IN A GROUP (6 RIDERS) The group must be DEFINITIVELY formed on July 1, 2026

Your Name (Rider 1) :..... **Rider 2 :**.....

Rider 3 :..... **Rider 4 :**.....

Rider 5:..... **Rider 6 :** .....

Date :.....**Signature**