DATE RECEIVED



34 DAWSON STREET DUBLIN 2, D02 RF90

> TEL.: 01-677 5628 FAX: 01-671 0793

INFO@MOTORSPORTIRELAND.COM

MOTORSPORTIRELAND.COM

2024 TEAM PRINCIPAL REGISTRATION FORM

		 			,						 				
MI LICENCE NO.															
APPLICANT'S NAME															
DATE OF BIRTH															
ADDRESS															
TOWN															
COUNTY															
EIRCODE															
PHONE															
EMAIL															
TEAM NAME															
ADDRESS															
TOWN															
COUNTY															
EIRCODE															
PHONE															
EMAIL															

REQUIREMENTS:

A TEAM IS DEFINED AS ANY ORGANIZATION RUNNING MORE THAN TWO (2) DRIVERS WHO ARE NOT THEIR CHILDREN. ONLY ONE TEAM PRINCIPAL PER TEAM IS ALLOWED. IF A TEAM REQUIRES THE REPLACEMENT OF THE EXISTING TEAM PRINCIPAL WITH ANOTHER THEN THEY MUST RETURN THE INITIAL LICENCE AND A NEW APPLICATION MUST BE SUBMITTED. ONE ID PHOTO PER APPLICATION MUST BE PROVIDED WITH EACH APPLICATION UNLESS ALREADY ON FILE. NEW FOR 2024: THE PERSON ACTING AS THE HOLDER OF THE TEAM PRINCIPAL LICENCE MUST BE GARDA VETTED.

OPTIONS										
STANDARD PROCESSING	14-DAYS BEFORE FIRST EVENT	€60								
PRIORITY PROCESSING	5-DAYS BEFORE FIRST EVENT	€160								
SAME DAY PROCESSING	LAST BUSINESS DAY BEFORE FIRST EVENT	€260								

DECLARATION

In accordance with the FIA International Sporting Code and Articles 108 and 109 of the General Competition Rules of Motorsport Ireland, I/we hereby apply for registration/re-registration for the year 2024 on the Team Principals Register of Motorsport Ireland and I/we undertake, if registered, to submit to and be bound by the International Sporting Code of the FIA and the General Competition Rules and Regulations of Motorsport Ireland, the Irish Anti-Doping Rules and any regulations supplementary thereto as may be imposed from time to time by Motorsport Ireland. I/we have read and understood the terms of issue and am/are a permanent resident of the Republic of Ireland and/or I/we am/are an Irish National(s). I/we hereby agree to abide by the guidelines and regulations contained in Motorsport Ireland's General Code of Conduct, the Code of Conduct for Children's Sport and Motorsport Ireland's Social Media Policy. Expiry 31st December each year.

APPLICANT'S SIGNATURE	DATE

DATE RECEIVED



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2024 PAYMENT FORM

SECTION 1: PERSONAL DETAILS

SURNAME																								
FIRST NAME																								
DATE OF BIRTH			-			-																		
MI LICENCE NUMBER																								
SECTION 2: PAYMENT OPTIONS																								
CARD NUMBER EXPIRY																vv								
-						-						-						-						
				ı				l														 		
EXACT NAME ON CARD:																								
I authorise Motorsport Ireland to deduct the cost of any product / licence / service selected on this or any accompanying form or document which I have provided including all relevant and specified additional costs. Alternatively, I have provided the correct value in the form of cheque/cash/postal order and attached it to this form.																								
SIGNAT	TURE:																							
IN ACCORDANCE WITH 2018 GDPR GUIDELINES, THIS PAGE WILL BE																								

N ACCORDANCE WITH 2018 GDPR GUIDELINES, THIS PAGE WILL BI DESTROYED ONCE PAYMENT HAS BEEN COMPLETED. ANY SUBSEQUENT CHARGES TO YOUR ACCOUNT WILL REQUIRE FURTHER AUTHORISATION.