



## CEMAR 2

Rötha (D)  
01.07.2017

### Entry form

**Class:** .....

**Start #:** .....

**Name:** .....

**Vorname:** .....

**Birthday:** .....

**E-Mail:** .....

**Tel-Nr.:** .....

**Transponder:** .....

**Bike:** .....

**Year :** .....

**Adress:** .....

**State:** .....

.....

.....

**Date:** .....

**Signatur:** .....

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or Fax to: **+49 2734 4336570**