



MEDIA ACCREDITATION FORM – 2024 SEASON
GT OPEN – EUROFORMULA – GT CUP

To be returned by mail to alfredo.filippone@gtsport.es or by fax: +34915780582

NAME*:

(Please state Family name in capitals)*

DATE OF BIRTH:

ADDRESS:

PHONE :

E-MAIL:

MEDIA NAME:

MEDIA TYPE: **PRESS / WEB** **PHOTO**
 PRESS OFFICER **TV / WEB-TV**

EVENT(S) to attend:

- | | |
|---|---|
| <input type="checkbox"/> R1: Portimão (27-28/4) | <input type="checkbox"/> R2: Hockenheim (11-12/5) |
| <input type="checkbox"/> R3: Spa (25-26/06) | <input type="checkbox"/> R4: Hungaroring (22-23/6) |
| <input type="checkbox"/> R5: Paul Ricard (20-21/7) | <input type="checkbox"/> R6: Red Bull Ring (14-15/9) |
| <input type="checkbox"/> R7: Barcelona (28-29/9) | <input type="checkbox"/> R8: Monza (19-20/10) |
| <input type="checkbox"/> Winter Test Barcelona (11-13/3) | |

DATE:

SIGNATURE: