Ultramagic
Youth Summer Camp

TEAM ENTRY FORM

PILOT:

Name: .....Surname: .....

Address: .....

City: .....Postal Code: .....

Country: .....

Phone home: ..... Mobile phone: .....

E-mail:.....

Pilot licence: .....Total P.I.C. hours: .....

Medical certificate: .....

Age.....T-shirt size....

CREW:

1. Name..... Age.....T-shirt size....

E-mail ..... Mobile phone..... Country .....

2. Name..... Age.....T-shirt size....

E-mail ..... Mobile phone..... Country .....

Please, let us know as soon as possible if you wish that we arrange the crew for you. In that case, they would share with you the entry fee.

BALLOON:

Registration: ..... Volume: .....

Make: ..... Type: .....

Commercial name: .....

C. of A. valid until: .....

INSURANCE:

Company: .....Nº: .....

Liability: ..... Validity: .....

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

Please send this entry form to adriana@ultramagic.com before **May 31st 2022**, with a copy of the bank transfer of 50eur per person.

Bank details:
Caja de Ahorros y Pensiones de Barcelona "La Caixa"
Rambla General Vives, 2 08700 IGUALADA (Spain)
IBAN: ES81 2100 0001 0202 0062 6302 Swift: CAIXESBB