



Dorsal

CO-DRIVER CHANGE REQUEST

DRIVER: _____

ID _____

PHONE: _____

REQUEST TO THE RACE DIRECTOR

Request for co-driver change in the following section or stage (cross out as appropriate), to:

Full name: _____

ID: _____ License No.: _____

Phone: _____

The undersigned, as driver and co-driver registered in the Rallye Festival Hoznayo 2026,

DECLARE UNDER THEIR SOLE RESPONSIBILITY:

- 1.- That the information provided is true, complete, and accurate.
- 2.- That they fully know and expressly accept the Supplementary Regulations of the Event without any reservation or limitation.
- 3.- That they accept the decisions made by the Race Direction and Competent Authorities during the event.
- 4.- That they participate in the event under their sole responsibility, assuming all risks inherent to a motorsport competition of this nature.
- 5.- That they declare they have the knowledge, technical ability, and physical condition required to participate, committing to comply with all Spanish laws, traffic regulations, sporting rules, and applicable provisions.
- 6.- That they are familiar with the course of the event prior to participation.
- 7.- That they expressly release the organization, organizing committee, officials, sponsors, and collaborating entities from any liability for personal or material damage they may suffer or cause as a result of their participation in the event.

DRIVER

In Hoznayo, on the ____ of April 2026

CO-DRIVER

Signed. _____

Signed _____