

WBB CHALLENGE 2025

Registration Form

I, the undersigned,

Name:

First Name:

Address:

Postal Code / City:

Country:

Email:

Date of Birth:/...../.....

Choice of race number for the year:

License number: (leave blank, will be completed by WBB)

The cost of the fixed registration fee for the WBB CHALLENGE 2025 is: €2300 (excluding license).

I commit to:

- Registering for the WBB 2025 Championship;
- Subscribing to the EUROPE OPEN WBB license issued by the FMB;
- Complying with the technical and sports regulations that will be provided to me;
- Having read and accepted the specific registration conditions;
- Paying a deposit of €1300 upon registration to account BE55 0689 5218 2844;
- Settling the remaining balance in 2 payments of €500 each before March 20, 2025, to account BE55 0689 5218 2844.

Note: Each payment must include the following reference: "name + surname registration challenge 2025."

Motorcycle:

- Brand:.....
- Model:.....
- Engine capacity:.....CC

➔ Class: SBK SSP (check the box)

➔ License: First license in 2025 Already licensed before 2025 (check the box)

➔ Your T-shirt size:

I wish to be informed about the cancellation insurance product and, if applicable, subscribe to it.

Made in on...../...../20....

Signature

Special Conditions:

This form is the only means of registering for the championship.
It will only be valid after full payment of the registration fee.
Refund policy in case of cancellation of the championship:

Refund:

No refunds are provided except for the reasons mentioned below:

- Cancellation of the event by the organizer.

The registration covers the entire championship.

