



MEDIA ACCREDITATION FORM – 2025 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 (26-27/4) | <input type="checkbox"/> R2: Spa (17-18/5) |
| <input type="checkbox"/> R3: Hockenheim (07-08/6) | <input type="checkbox"/> R4: Hungaroring (05-06/7) |
| <input type="checkbox"/> R5: Paul Ricard (19-20/7) | <input type="checkbox"/> R6: Red Bull Ring (06-07/9) |
| <input type="checkbox"/> R7: Barcelona (20-21/9) | <input type="checkbox"/> R8: Monza (18-19/10) |
| <input type="checkbox"/> Winter Test Barcelona (25-26/3) | |

DATE:

SIGNATURE: