

January 2017

Event Cancellation/Postponement Advice

DATE:	
TO: The Secretary, Malta Motorsport Federation	
FROM:	Name:
	Organisation:
RE:	Event:
	Permit No:
	Date of Event:
	Status:
Please note that the event as detailed above has been:	
□ CANCELLED	
OR	
□ POST	PONED to/ at (venue)
Please arrange revalidation of the enclosed permit.	
I did notify the appointed Steward	
	VERBALLY IN WRITING
Signed:	

PLEASE NOTE: THIS FORM MUST BE FURNISHED WITHIN THREE DAYS OF EVENT POSTPONEMENT OR CANCELLATION.

Registered Address

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