



POWER OF ATTORNEY

I, the undersigned:

name:	
birth name:	
place and date of birth:	
mother's name:	
address:	

I hereby authorize

name:	
birth name:	
place and date of birth:	
mother's name:	
address:	

to use the motor vehicle owned by me, at his own risk and responsibility, with license plate number [redacted] and model [redacted] (hereinafter: "vehicle") on [redacted], 20 [redacted], at the Hungaroring Circuit (hereinafter: "Circuit"), on the Hungaroring Car Open Day (hereinafter: "Event") organized by HUNGARORING Sport Zrt. (seat: 2146 Mogyoród, Hungaroring út 10. Tax ID: 10603226-2-44, Company Registration Number: 13-10-040464, represented by: Zsolt István Gyulay, Chairman and CEO; hereinafter: "Organizer" or "HUNGARORING Sport Zrt.").

This power of attorney is valid exclusively for the day of the Event and may be revoked by the Authorizing Party at any time.

A mandatory attachment to this power of attorney is the declaration called "Personal Liability and Insurance Coverage," completed and signed by the vehicle owner as the Authorizing Party, without which HUNGARORING Sport Zrt. will not accept it this power of attorney.

_____, 20____.

Authorizing Party

I accept this authorization:

_____, 20____.

Authorized Party

In our presence as witnesses:

Witness 1		Witness 2	
Name:		Name:	
Mother's name:		Mother's name:	
Address:		Address:	
Signature:		Signature:	

PERSONAL LIABILITY AND INSURANCE COVERAGE

Event: **"HUNGARORING CAR OPEN DAY"**

Location (Circuit): Hungaroring / 2146 Mogyoród, Hungaroring út 10.

Date: 20__ . ____ . ____

I, the undersigned:

name:	
birth name:	
place and date of birth:	
mother's name:	
address:	

I hereby declare that, based on the power of attorney I granted on _____, 20__ ,

name:	
birth name:	
place and date of birth:	
mother's name:	
address:	

is participating, with my knowledge and consent, at his/her own risk and responsibility on the **Hungaroring Car Open Day** (hereinafter: "**Event**") organized by HUNGARORING Sport Zrt. (seat: 2146 Mogyoród, Hungaroring út 10. Tax ID: 10603226-2-44, Company Registration Number: 13-10-040464, represented by: Zsolt István Gyulay, Chairman and CEO; hereinafter: "Organizer" or "**HUNGARORING Sport Zrt.**") with the motor vehicle owned by me, with license plate number _____ and model _____ (hereinafter: "**vehicle**") on _____, 20__ , at the Hungaroring Circuit (hereinafter: "**Circuit**").

A) Mandatory Motor Vehicle Liability Insurance (KGFB) and CASCO – Circuit Exclusion/Restriction

I expressly acknowledge and accept that the coverage of the mandatory motor vehicle liability insurance (KGFB) for my vehicle, or the CASCO insurance that I have or may have taken out, typically does not cover use on the Circuit, or may only cover it to a limited extent (including in particular circuit use, driving training, and sports/event track use), based on the terms and conditions of the insurance company providing the insurance (GTC/Business Rules) and the provisions of the insurance policy.

Initials: _____

I acknowledge that **verifying the existence of coverage is solely my responsibility**; HUNGARORING Sport Zrt. **does not examine or guarantee** that any insurance provides coverage for events occurring on the Circuit premises.

Initials: _____

I acknowledge that if the insurance company, **for any reason, refuses to provide coverage, applies an exclusion, or limits payment** in connection with an event occurring at the Circuit, then **all resulting damages, costs, and claims** (in particular: damage to my own property, damage caused to other vehicles, damage caused to facilities) **shall be borne by me**, and I shall be liable for them.

Initials: _____

B) Closing Statement

I hereby declare that **I have read and understood** the above statement and **expressly accept it with separate confirmation**.

Initials: _____

Dated: Mogyoród, 20__ , ____ , ____

Signature of the vehicle owner: _____