24 H	EURES DU	MANS	Client N°:		Booking Deadline 7th May 2007
			Address:		
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urname:]		
irst Name:			_ 		
hone:			Post Code:		
loblie Phone:			Town:		
ax:			Country:		
-mail:					
ATTENTION; In case				ces, we will allocat	e you the closest area available
Type of ticket	Choice (name on the leaflet)	Rates	Quantity		(Preferred seats n°, situation)
ENTRANCE:		€		€	
		€	<u> </u>	€	
CAR PARK:		€		€	
		€		€	
		€		€	
LAY-BY:		€		€	
	<u> </u>	€		€	
		€		€	
STANDS:	<u> </u>	€	-	€	
		€		€	
	····	€		€	
OTHER		€		€	
SUPPLEMENTS:		€		€	
1 wish to pick u	p my tickets on my an	rival			€10 (France Métropolitaine)
1 wish to receive my ticket and will pay the postal charges			95;	+ €	€16.50 (Abroad)
		TOTAL CO	ST OF MY BOOKING	+€	
l,		, confirm the a	above booking after tak	ing note of the te	erms of sale hereafter.
Date:			Signature:		
Terms of Sale: The booking will not b over the phone. We do	e handled after the deadl o not refund the tickets. In	ine date, 7th May 200; case of force majeure	7 We accept payment in euros	only: cheque, credit ca within the 30 days after the	ord, cash or bank transfer.We do not take paym the race with offical justificatory papers.
your letter. During the	race, our office will be tra	nsierred to the denier.	letter indicating time and place to de Exposition under the name "A ant of the postal charges. We sen ng cost for a second dispatch.	or collection.Tickets will ccueil Général*, d them only by registere	be available from April 2007 upon presentation and mail (UPS). In case of return of the tickets du
I do not wish to receiv	e any information regardi	ng the *24 Heures du N	Mans" or concerning the advanta	ges and services propos	sed by the ACO



Please send back your booking form to:

AUTOMOBILE CLUB DE L'OUEST - Billetterle - Circuit des 24 Heures du Mans - 72019 LE MANS CEDEX 2

Tél: +33 (0)892 697 224 (0,34€ / min) - Fax: +33 (0)2 43 84 47 13 - E-mail: ticket@lemans.org - Site Internet: www.lemans.org/ticket