**FIRST ENTRY FORM**

|  |  |
| --- | --- |
| **Federation/Club** | |
| **Contact** |  |
| **Email address** |  |
| **Telephone number** |  |
| **Number of participants** |  |
| **Officials** |  |
| **Female athletes** |  |
| **Male athletes** |  |

Please fill in with capital letters return before 10 June, 2014

DATE:

Signature of the head of the delegation and stamp of the federation