**DELEGATIONS’ NUMERICAL INSCRIPTION FORM**

**1ST ENTRY**

|  |  |  |  |
| --- | --- | --- | --- |
| FEDERATION: | | | |
| CONTACT PERSON |  | POSITION |  |
| PHONE NUMBER |  | EMAIL |  |

Federation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **COMPETITION** | |  | **TRAINING CAMP** | |
| ATHLETES WOMEN |  |  | ATHLETES WOMEN |  |
| ATHLETES MEN |  |  | ATHLETES MEN |  |
| COACHES |  |  | COACHES |  |
| REFEREES |  |  | REFEREES |  |
| OTHERS |  |  | OTHERS |  |
| TOTAL PERSONS |  |  | TOTAL PERSONS |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ARRIVAL DATE |  |  | DEPARTURE DATE |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| WILL YOU NEED TRANSFER  LISBON/COIMBRA/LISBON | NO | YES | NUMBER PERSONS |  |

**Attention:**

1. Only inscriptions filled and confirmed by national federations will be accepted.
2. This form must be returned to the Hellenic Judo Federation before **February 19th**

Date Head of the Delegation's Signature and the Federation's Stamp

\_\_/\_\_/\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DELEGATIONS’ NOMINATIVE INSCRIPTION FORM**

**2ND ENTRY**

|  |
| --- |
| FEDERATION: |

|  |  |  |
| --- | --- | --- |
| **COACHES / OFFICIALS** | | |
|  | **Name/Surname** | **Function** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| 4. |  |  |
| 5. |  |  |

|  |  |
| --- | --- |
| **Referees** | **Licence** |
|  | **IFJ - A 🗆 / B 🗆 / National 🗆** |
|  | **IFJ - A 🗆 / B 🗆 / National 🗆** |

|  |  |  |
| --- | --- | --- |
| **OTHERS** | | |
|  | **Name** | **Function** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |

**Attention:**

1. Only inscriptions filled and confirmed by national federations will be accepted.
2. This form must be returned to the Hellenic Judo Federation before **March 14th 2016**

Date Head of the Delegation's Signature and the Federation's Stamp

\_\_/\_\_/\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DELEGATIONS’ NOMINATIVE INSCRIPTION FORM**

**2ND ENTRY - WOMEN**

|  |
| --- |
| FEDERATION: |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **weight category** | **Family name** | | **First name** | **Date of birth** | **Best results** | **Participating in TCamp (Yes/No)** |
| **44 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| **48 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| **52 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| **57 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| **63 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| **70 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| **78 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| **+78 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |

This form must be returned to the Hellenic Judo Federation before **March 14th 2016**

Entry should be entered in JUDOBASE by not later 28th March 2016

Date: \_\_/\_\_/\_\_ Head of the Delegation's Signature & Federation's Stamp: \_\_\_\_\_\_\_\_\_\_\_\_\_

**DELEGATIONS’ NOMINATIVE INSCRIPTION FORM**

**2ND ENTRY - MEN**

|  |
| --- |
| FEDERATION: |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **weight category** | **Family name** | | **First name** | **Date of birth** | **Best results** | **Participating in TCamp (Yes/No** |
| **55 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| **60 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| **66 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| **73 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| **81 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| **90 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| **100 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| **+100 kg** | 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |

This form must be returned to the Hellenic Judo Federation before **March 14th 2016**

Entry should be entered in JUDOBASE by not later 28th March 2016

Date: \_\_/\_\_/\_\_ Head of the Delegation's Signature & Federation's Stamp: \_\_\_\_\_\_\_\_\_\_\_\_\_

**FLIGHT SCHEDULE**

|  |
| --- |
| FEDERATION: |

**ARRIVAL**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **PLANE / TRAIN** | | | | | |
| Date | Time | Flight number | From | Airport/railway station arrival | Persons number |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Car / bus** | | |
| Date | Time | Persons number |
|  |  |  |
|  |  |  |
|  |  |  |

**DEPARTURE**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **PLANE / TRAIN** | | | | | |
| Date | Time | Flight number | To | Airport/railway station arrival | Persons number |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Car / bus** | | |
| Date | Time | Persons number |
|  |  |  |
|  |  |  |
|  |  |  |

This form must be returned to the Hellenic Judo Federation before **March 18th 2016**

Date: \_\_/\_\_/\_\_ Head of the Delegation's Signature & Federation's Stamp: \_\_\_\_\_\_\_\_\_\_\_\_\_

**MEDIA ACCREDITATION FORM**

|  |
| --- |
| FEDERATION: |

|  |  |  |
| --- | --- | --- |
| Surname |  |  |
| Name |  |  |
| Passport Number |  |  |
| AIPS Card No |  |  |
| Company |  |  |
| Address |  |  |
| Email |  |  |
| Phone |  |  |
| Mobile |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Function (please circle)** | Journalist | Photographer | Technician |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **If Journalist**  **(please circle)** | | | Television | Radio | Newspaper | Magazine | Internet |  |
|  |

~

This form must be returned to the Hellenic Judo Federation before **March 18th 2016**

Date: \_\_/\_\_/\_\_ Head of the Delegation's Signature & Federation's Stamp: \_\_\_\_\_\_\_\_\_\_\_\_\_

**VISA APLICATION FORM**

|  |
| --- |
| FEDERATION: |

Arrival Date: Departure Date:

We will apply for the Visas at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Embassy in\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(City/Country).

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***N*** | ***Surname*** | ***First Name*** | ***Position*** | ***Date of Birth*** | ***Place of Birth*** | ***Nationali ty*** | ***Pass No*** | ***issue Date of*** | ***Date of expiry*** |
| ***1*** |  |  |  |  |  |  |  |  |  |
| ***2*** |  |  |  |  |  |  |  |  |  |
| ***3*** |  |  |  |  |  |  |  |  |  |
| ***4*** |  |  |  |  |  |  |  |  |  |
| ***5*** |  |  |  |  |  |  |  |  |  |
| ***6*** |  |  |  |  |  |  |  |  |  |
| ***7*** |  |  |  |  |  |  |  |  |  |
| ***8*** |  |  |  |  |  |  |  |  |  |
| ***9*** |  |  |  |  |  |  |  |  |  |
| ***10*** |  |  |  |  |  |  |  |  |  |
| ***11*** |  |  |  |  |  |  |  |  |  |
| ***12*** |  |  |  |  |  |  |  |  |  |
| ***13*** |  |  |  |  |  |  |  |  |  |
| ***14*** |  |  |  |  |  |  |  |  |  |
| ***15*** |  |  |  |  |  |  |  |  |  |
| ***16*** |  |  |  |  |  |  |  |  |  |
| ***17*** |  |  |  |  |  |  |  |  |  |
| ***18*** |  |  |  |  |  |  |  |  |  |
| ***19*** |  |  |  |  |  |  |  |  |  |
| ***20*** |  |  |  |  |  |  |  |  |  |
| ***21*** |  |  |  |  |  |  |  |  |  |
| ***22*** |  |  |  |  |  |  |  |  |  |
| ***23*** |  |  |  |  |  |  |  |  |  |
| ***24*** |  |  |  |  |  |  |  |  |  |
| ***25*** |  |  |  |  |  |  |  |  |  |

This form must be returned to the Hellenic Judo Federation before **February 18th 2016**

Date: \_\_/\_\_/\_\_ Head of the Delegation's Signature & Federation's Stamp: \_\_\_\_\_\_\_\_\_\_\_\_\_

Application must be sent only in *word* doc. *PDF* files will be rejected

**Please return before 14th March 2016**

**Fax +30 210 4820042 Tel +30 6957508008**

**E-mail:** [**iliadiscup@yahoo.gr**](mailto:iliadiscup@yahoo.gr)

**Hotel reservation can be made only with this form**

|  |  |
| --- | --- |
| **Team of:** |  |

|  |  |
| --- | --- |
| **HOTEL** | **President Hotel** |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Room type** | **Name(s) of guest(s)** | | **Meals**  **(B&B,HB,FB)** | **Arrival Date** | **Departure Date** | **Number of Persons** | **Number of nights** | **Total amount, Euro** |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  | | **Total Persons** | |  |  |  | **Total Euro** |  |

**All payment by cash for Organizing Committee on arrival**