**HOTEL RESERVATION FORM**

|  |  |
| --- | --- |
| **Return to:** | TOURNAMENT ORGANIZER**e-mail:** [judoblr@tut.by](file:///C%3A%5CUsers%5Ceju%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CTemporary%20Internet%20Files%5CContent.Outlook%5CVGHJM2Q0%5Cjudoblr%40tut.by)**Tel./Fax: +375 (17) 292 1459,** **CONTACT PERSON: Andrew Vlasik** **+375 29 119 17 70** |
| **Please return until:** | **5.09.2012** |

**Federation:**

|  |
| --- |
|  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Room type:** | **Arrival date:** | **Departure date:** | **Number****of nights:** | **Number****of persons:** | **Total****In Euros** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Total Persons:** |  |
| **Total Cost, Euros:** |  |

Date:\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_

EJU World Cup Men, Minsk

6th October 2012

|  |
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|  |
|  |
| **Address: 2, Surganova str.,****220012 Minsk/Belarus****Tel./Fax +375 (17) 2921459** **e-mail**: judoblr@tut.by |

# EJU WORLD CUP Men

**6th October 2012, Minsk**

**FIRST ENTRY**

|  |  |
| --- | --- |
| **Return to:** | TOURNAMENT ORGANIZER**e-mail:** judoblr@tut.by**Fax +375 (17) 2921459** |
| **Please return before:** | **01.09.2012** |

|  |  |
| --- | --- |
| **Federation:** |  |
| **Tel./fax:** |  |
| **Address:** |  |
| **E- mail:** |  |
| **Contact person:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Participation:** | **Number** **of Athletes** | **Number** **of Officials** | **Total persons:** |
| **World Cup**  |  |  |  |

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EJU World Cup Men, Minsk

 6th October 2012

# EJU WORLD CUP Men

**6th October 2012, Minsk**

**FINAL ENTRY**

|  |  |
| --- | --- |
| **Return to:** | TOURNAMENT ORGANIZERe-mail: judoblr@tut.by**Fax +375 (17) 292 14 59** |
| **Please return before:** | **19.09.2012** |

|  |  |
| --- | --- |
| **OFFICIALS** |  |
| **COACHES** |  |
| **REFEREES** |  |
| **OTHERS** |  |

**Participants Men**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Weight** **Category** | **Surname** | **First name** | **Birth date** | **Best result** |
| **–48 kg** |  |  |  |  |
|  |  |  |  |
| **–52 kg** |  |  |  |  |
|  |  |  |  |
| **–57 kg** |  |  |  |  |
|  |  |  |  |
| **–63 kg** |  |  |  |  |
|  |  |  |  |
| **–70 kg** |  |  |  |  |
|  |  |  |  |
| **–78 kg** |  |  |  |  |
|  |  |  |  |
| **+78 kg** |  |  |  |  |
|  |  |  |  |

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EJU World Cup Men, Minsk

 6th October 2012

# EJU WORLD CUP Men

**6th October 2012, Minsk**

|  |  |
| --- | --- |
| **Return to:** | TOURNAMENT ORGANIZERe-mail: judoblr@tut.by**Fax +375 (17) 292 14 59** |
| **Please return before:** | **19.09.2012** |

**REFEREE INSCRIPTION FORM**

**Federation:**

|  |
| --- |
|  |

The following referees will represent our Federation at the above mentioned World Cup:

|  |  |  |
| --- | --- | --- |
| **Surname:**  |  | **First name:** |
| **Sex:**  |  | **Licence:**  |

|  |  |  |
| --- | --- | --- |
| **Surname:**  |  | **First name:** |
| **Sex:**  |  | **Licence:**  |

**The travel and stay costs are to be paid by your Federation.**

Date:\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_

Signature of the President and stamp of the Federation.

EJU World Cup Men, Minsk

 6th October 2012

# EJU WORLD CUP Men

**6th October 2012, Minsk**

**TRAVEL DETAILS**

|  |  |
| --- | --- |
| **Return to:** | TOURNAMENT ORGANIZERFax +375 (17) 292 14 59**e-mail:** [judoblr@tut.by](file:///C%3A%5CUsers%5Ceju%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CTemporary%20Internet%20Files%5CContent.Outlook%5CVGHJM2Q0%5Cjudoblr%40tut.by) |
| **Please return before:** | **23.09.2012** |

**Federation:**

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|  |  |  |
| --- | --- | --- |
| **Arrival** | Date |  |
| *Time* |  |
| *Place* |  |
| *Flight number* |  |
| *Train* |  |
| *Other means of transport* |  |

|  |  |  |
| --- | --- | --- |
| **Departure** | Date |  |
| *Time* |  |
| *Place* |  |
| *Flight number* |  |
| *Train* |  |
| *Other means of transport* |  |

Date:\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_

EJU World Cup Men, Minsk

 6th October 2012

***Visa Application Form***

**FEDERATION  Stamp & Signature**

Our delegation needs the invitation from the \_\_\_\_\_\_ till the \_\_\_\_\_\_ of \_\_\_\_\_.

We will apply for visas at the Belarusian Embassy in \_\_\_\_\_\_\_\_\_ or at the National Airport Minsk

*Please fill in the table in BLOCK LETTERS*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** | **Surname** | **Position** | **Date of Birth** | **Passport Number** | **Date of Expiry** |
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Please send this form as soon as possible

to the Belarusian Judo Federation

**Fax Number:** (+375 17) 292 14 59 **Email: judoblr@tut.by**

EJU World Cup Men, Minsk

6th October 2012