

Final Entry Form

The Federation of:

Competitors First Name	Surname	F	M	Full Date of birth	1	3	10	Synchro		Synchro Mix		Accommodation Rooming List		
								3	10	3	10	S	TW	TR
1				/ /										
2				/ /										
3				/ /										
4				/ /										
5				/ /										
6				/ /										
7				/ /										
8				/ /										
9				/ /										
10				/ /										
11				/ /										
12				/ /										

OFFICIALS

First name	Surname	F	M	/ /	Function	S	TW	TR
				/ /	Team Manager			
				/ /	Coach			
				/ /				
				/ /				
				/ /				
				/ /				
				/ /				
				/ /				
				/ /				
				/ /				

HOTEL BOOKING FORM: n.single rooms **n.twin rooms** **n.triple rooms**

ARRIVAL: DATE: ___/___/___ TIME: ___:___ AIRLINE: ___ FLIGHT N.: ___ TRAIN: ___ OTHER: ___ n° of People ___
(to Verona Airport) (Railway Bolzano)

DEPART.: DATE: ___/___/___ TIME: ___:___ AIRLINE: ___ FLIGHT N.: ___ TRAIN: ___ OTHER: ___ n° of People ___
(from Verona Airport) (from Railway Bolzano)

DATE: _____

STAMP OF THE FEDERATION

PLEASE SEND THIS FORM BACK TO
 THE BOLZANO NUOTO
 email: registration@divingmeeting.it
WITHIN AND NO LATER THAN 5th MAY 2023