



Preliminary Entry Form

46° Bolzano Diving Meeting Alto Adige – Südtirol

FEDERAT	ON/CLU		CODE							
INTENTION TO PARTICIPATE:					YES				N	0
NUMBER										
NUMBER	OF FEMA	ALE DIVE	ERS:							
NUMBER OF MANAGERS/OFFICIALS:										
NUMBER	of Judo	SES:								
EVENT	MEN 3M	MEN 10M	MEN 3M SYN	MEN 10M SYN	WOMEN 3M	WOMEN 10M	WOMEN 3M SYN	WOMEN 10M SYN	MIX 3M SYN	MIX 10M SYN
N. OF										

ARRIVAL DATE:	BY AIR	BY TRAIN	OTHER	
NEED FOR VISA SUPPORT LETTER:	YES	NO		
NOTES:				

DATE: _____

ATHLETES

STAMP OF THE FEDERATION



PLEASE SEND THIS FORM BACK TO: ASD BOLZANO NUOTO Email: <u>registration@divingmeeting.it</u> WITHIN AND NO LATER THAN 06th May 2024