*Appendix № 1*

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**PRELIMINARY/FINALENTRY FORM**

|  |  |
| --- | --- |
| **Country:** **Contact person** **e-mail:** **tel.:**  | **Total Amount of members:**   |
| **Arrival date:**  |  |
| **Departure date:** |   |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***№*** | ***Name and Surname*** | ***Function*** | ***GenderM/F*** | ***Date of birth*** | ***Weight category*** | ***SpecialitySS/CS*** |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |
| 15 |  |  |  |  |  |  |
| 16 |  |  |  |  |  |  |

**Signature**

**President of the Head of the delegation**

**Date:**