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| *№* | *SURNAME* | *NAME* | *Nationality* | *Gender*  *(M/F)* | *Date of birth and place*  *(dd.mm.yyyy. City, Region)* | *Adress*  *(Country, City, Str., Nr. of building)* | *Nr. of passport* | *Function*  *(coach, athlete etc.)* |
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***Visa Application Form***

**FEDERATION: ………………………………**

Our delegation needs the invitation from the ……. till ……. of October

We will apply for visas at …………. (Embassy) in … (City)

This form must be returned to the Latvian SAMBO clubs association [info@sambo.lv](mailto:info@sambo.lv) before the 1st of September.