**XIII. Masters Open European Championships
Gyömrő, Hungary**

 **19-22 September 2019**

ENTRY FORM “A-B”

**Return not later than** **31st August**

**Nation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Tel : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| --- | --- | --- | --- | --- | --- | --- |
| **Athlete**Last Name | First Name | **UIPM Licence****ID Number** | Date of Birth | Pentathlon/Tetrathlon | RelayY/N (Partner) | Swim Time(50m/100m) |
|  |  |  | dd.mm.yyyy |  |  |  |
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| **Officials/Partner** Surname | First Name | Function |
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**ACCOMODATION: Mark with “X”:**

**The Delegation will stay in the Official Hotel YES NO**

Single rooms n. \_\_\_\_\_\_\_ from\_\_\_\_\_\_\_\_\_\_\_\_\_ to\_\_\_\_\_\_\_\_\_\_\_\_
Double rooms n. \_\_\_\_\_\_\_ from \_\_\_\_\_\_\_\_\_\_\_ to\_\_\_\_\_\_\_\_\_\_\_\_
Trible Rooms n. \_\_\_\_\_\_\_ from\_\_\_\_\_\_\_\_\_\_\_\_\_ to\_\_\_\_\_\_\_\_\_\_\_\_

**Please return to Gábor Molnár, LOC**

E-mail: gmolnar63@gmail.com

**Name (printed) + signature:**

 **Date:**

**XIII. Masters Open European Championships
Gyömrő, Hungary**

 **19-22 September 2019**

ENTRY FORM “C” (Final)

**Return not later than 31st August**

**Nation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Tel : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| Last Name | First Name | Function | Arrival Date | Time(Flight No.) | Type oftransport | Depart. Date | Room Type (S/D) |
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**Please return to Gábor Molnár, LOC**

E-mail: gmolnar63@gmail.com

**Name (printed) + signature:**

 **Date:**