



## ENTRY FORM B

**PLEASE RETURN NO LATER THAN 1<sup>th</sup> MAY 2026**

**Please complete using capital letters**

Nation: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
 Tel: \_\_\_\_\_ Email: \_\_\_\_\_

### Male Athletes

Surname	First Name	ID Number	Date Birth	Swim time	Passport No.	Serial No

### Female Athletes

Surname	First Name	ID Number	Date Birth	Swim time	Passport No.	Serial No

### Officials

Surname	First Name	Function	Passport No

**Return to:** **FEDERACIÓ CATALANA DE PENTATLÓ MODERN**  
**PHONE:** **+ 34 676 48 27 03**  
**Web:** [www.fcpenatló.cat](http://www.fcpenatló.cat) [www.pentatlón.info](http://www.pentatlón.info)  
**e-mail:** [europeanjuniorch2026@pentatló.cat](mailto:europeanjuniorch2026@pentatló.cat)

**Signature:** \_\_\_\_\_ **Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

