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| ***FEDERATION:*** |  |

**Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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|  | Sex (M/F) | FamilyName | GivenNames | **Passport No.** | Event(s) |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |
| **4** |  |  |  |  |  |
| **5** |  |  |  |  |  |
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| **11** |  |  |  |  |  |
| **12** |  |  |  |  |  |

*Note: This form should be accompanied with digital passport size photographs of each team member.*

Chop of Federation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Federation’s representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Federation’s representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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