####

#### ENTRY FORM

**09.09.2017.-10.09.2017., Skolas street 1, Birzgale, Latvia.**

|  |  |  |
| --- | --- | --- |
| The Table Tennis Association of |  | enters the following delegation: |

|  |
| --- |
| **Men’s Team** |
|  | **FAMILY NAME** | **FIRST NAME** | **Date of Birth** | **Arrival date and time** | **Departure date and time** | **Accommodation** |
| **1.** |  |  |  |  |  | Free |
| **2.** |  |  |  |  |  | Free |
| **3.** |  |  |  |  |  | Free |
| **4.** |  |  |  |  |  |  |
| **Men’s Singles** |
| **5.** |  |  |  |  |  |  |
| **6.** |  |  |  |  |  |  |
| **7.** |  |  |  |  |  |  |
| **8.** |  |  |  |  |  |  |
| **Women’s Team** |
| **1.** |  |  |  |  |  | Free |
| **2.** |  |  |  |  |  | Free |
| **3.** |  |  |  |  |  | Free |
| **4.** |  |  |  |  |  |  |
| **Women’s Singles** |
| **5.** |  |  |  |  |  |  |
| **6.** |  |  |  |  |  |  |
| **7.** |  |  |  |  |  |  |
| **8.** |  |  |  |  |  |  |

|  |
| --- |
| **Coaches** |
|  | **FAMILY NAME** | **FIRST NAME** | **Male or Female** | **Arrival date and time** | **Departure date and time** | **Accommodation** |
| **1.** |  |  |  |  |  | Free |
| **2.** |  |  |  |  |  | Free |
| **Umpire** |
| **1.** |  |  |  |  |  | Free |

|  |
| --- |
| **Additional persons (if need accommodation)** |
|  | **FAMILY NAME** | **FIRST NAME** | **Male or Female** | **Arrival date and time** | **Departure date and time** |
| **1.** |  |  |  |  |  |
| **2.** |  |  |  |  |  |
| **3.** |  |  |  |  |  |

Please return this form not later than September 4th, 2017 to the e-mail: latgtf@latnet.lv

Signature/Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_