**ANNEX 4**

**FINAL FOREIGN COMPETITOR’S LIST FORM**

**(To be filled in and forwarded by 16st June 2017)**

Please complete this form and send it to the Organization by e-mail [masterworldcup.lasa@gmail.com](mailto:masterworldcup.lasa@gmail.com)

not later than 16 June 2017.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Country** |  | | | |
| **Club** |  | | | |
| **Athletes** | **Men** |  | **Women** |  |
| **Officials** | **Men** |  | **Women** |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| n. | Family Name | First Name | Athlete, Trainer, Delegation Chief, Doctor, Judge, Other | Men | Women | Room  type | Birth date |
| 1 |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |  |
| 15 |  |  |  |  |  |  |  |
| 16 |  |  |  |  |  |  |  |
| 17 |  |  |  |  |  |  |  |
| 18 |  |  |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **ARRIVAL:** |  |  | **Time:** |  |
| **Date:** |  | | **Flight No.** |  |
| **DEPARTURE:** |  |  | **Time:** |  |
| **Date::** |  | | **Flight No.** |  |

Please inform in this format if you need transportation airport- hotel – airport.

Date,

(President’s Signature/ stamp) (Full name in block letters)