



ENTRY FORM

CELL-CUP 2008 VESZPRÉM

09-15. augusztus 2008. (5 game day and 6 night)
Please, fill the form for every nominated team, with legible capital letters!



Name of the team	
Nation	
Address	
Telefon:	
Fax:	
E-mail:	
Name of the teamleader	
Address	
Telefon, fax:	
E-mail:	

CHOOSSED CATEGORY (x)

FA /-1989/ Male Adult , Junior		LA /-1989/ Female Adult, Junior	
FB /1990-91/ Boy Youth		LB /1990-91/ Girl Youth	
FC /1992-93/ Boy Juvenile		LC /1992-93/ Girl Juvenile	
FD /1994-95/ Boy Kid		LD /1994-95/ Girl Kid	
FE /1996-97/ Boy Mini		LE /1996-97/ Girl Mini	
FF /1998-99/ Boy Super mini		LF /1998-99/ Girl Super mini	

ACCOMODATION AND FOOD

1. Classroom: (mattress and sleeping-bag required)	person
2. Highschool Hostel	person
3/A Hotel Magister	person
3/B Hotel Magister	person
4. Hotel (****)	person

Other special demands questions	
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Expected arrival time of the team(s):	day	time
Expected leaving time of the team(s)	day	time
Type of transport (coach, train, car, airplane)		

With my signature I accept every regulations and aspects of the Competition Organization.

Date: 200.hónap.

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Signature of the Teamleader