

## NOMINATIVE REGISTRATION

please return until : **02.10.2024**

e-mail: [newlookcup@gmail.com](mailto:newlookcup@gmail.com)

Coach		
Judge		N. Judge Card:

Club	.....
Address	
City and Country	
Contact person	
Phone	
E-mail	
Travelling by (plane, bus, car)	
How many adults and gymnasts wishing for a banquet	
How many people do you want to transfer and which package?	
To take a photo, you need to write the participant (name, surname, year of birth, category, what subject we will be photographing!)	
Training for 1 participant (2 hours) 30 euros. How many gymnasts will there be?	
How many people do you want to go on the excursion?	

	Gymnast's Name	Apparatus	Categories	Date of birth		
0 1						
0 2						
0 3						
0 4						
0 5						

0 6						
0 7						
0 8						
0 9						
1 0						

*We declare that all athletes are properly insured against accidents and in*

*possession of a valid medical certificate* **Place and date** **Signature**

## TRAVEL FORM

please return until : **07.10.2024**

e-mail: [newlookcup@gmail.com](mailto:newlookcup@gmail.com)

Club	Contact Person:	..... .
	Phone:	
	E-mail:	

If the team delegation is scheduled on more than one flight, please complete one (1) form for each flight. For earlier arrival or later departure, please contact the OC

Arrival information - ..... persons						
Date				Arrival time		
By airplane	Airport	..... .	Flight #		From	..... .
By train	Train station		train #		From	
By bus	Bus station		Bus #		From	

By car						
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Departure information - ..... persons						
Date				Departure time		
By airplane	Airport	..... .	Flight #		From	..... .
By train	Train station		Train #		From	
By bus	Bus station		Bus #		From	
By car						

### Hotel Application

LAST NAME, First name	Function	Room type	Date of birth	Price per person/night	# of nights	Total
1.Madona Dzagoeva	Trainer	Double		50 euro	8	400
2.Anastasia Bondarenko	Gymnasts			50 euro	8	400

**Place and date Signature**