





**18<sup>th</sup> Irina Deleanu Cup  
Bucharest, ROMANIA (ROU)  
March 29<sup>th</sup> to 31<sup>th</sup> 2019**



Form to be sent to:

<b>Organizing Committee / Host Federation</b>
Romanian Rhythmic Gymnastics Federation Contact person: DIMA Gabriel Tel: +40.21.3170070; E-mail: <a href="mailto:office@frgr.ro">office@frgr.ro</a>

**Deadline: January 27<sup>th</sup> 2019**

**DEFINITIVE REGISTRATION**

Federation	Contact person:	
	Phone:	
	E-mail:	

	Individual competition	Group competition	Total
Judge			
Coach			
Gymnasts			
Additional Person			

Place and date	Seal of the NF	NF authorised signature
		Signature of the President or Secretary General of the participating FIG affiliated NF





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**MEALS FORM**

Federation	Contact person:	
	Phone:	
	E-mail:	

Date	Meal	Number (at xxx/person)
27.03	Lunch (if any)	
	Dinner (if any)	
28.03	Lunch (if any)	
	Dinner (if any)	
29.03	Lunch (if any)	
	Dinner (if any)	
30.03	Lunch (if any)	
	Dinner (if any)	
31.03	Lunch (if any)	
	Dinner (if any)	
1.04	Lunch (if any)	
	Dinner (if any)	
Banquet (complete if applicable)	Number:	
	<b>TOTAL</b>	

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**NOMINATIVE REGISTRATION**

Federation	Contact person:	
	Phone:	
	E-mail:	

**Gymnasts – Individual Competition**

First name	Family name	Date of birth	Gymnasts ID number	Category

**Gymnasts – Group Competition**

First name	Family name	Date of birth	Gymnasts ID number

**Officials**

	Name	Number of persons	Judge(s) ID number
Coach(es)			
Judge(s)			
Additional Person(s)			

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**TRAVEL SCHEDULE FORM**

Federation		Contact person:	
		Phone:	
		E-mail:	

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

Arrival information					
# of persons		# of luggage			
Date:		Arrival time			
<input type="checkbox"/> By airplane	Airport:		Flight #	From	
<input type="checkbox"/> By train	Station:		Train #	From	
<input type="checkbox"/> By car					

Departure information					
# of persons		# of luggage			
Date:		Departure time			
<input type="checkbox"/> By airplane	Airport:		Flight #	To	
<input type="checkbox"/> By train	Station:		Train #	To	
<input type="checkbox"/> By car					

Local transport cost (complete if applicable)	Number at XXX/person		Total	

Place and date	Seal of the NF	NF authorised signature
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
**Deadline: January 27<sup>th</sup> 2019**

**VISA REQUEST FORM**

<b>Federation</b>	<b>Contact person:</b>	
	<b>Phone:</b>	
	<b>E-mail:</b>	

LAST NAME, First name	Function	Gender M/F	Date of birth dd.mm.yyyy	Citizenship and passport N°	Passport expiry date	Arrival date	Departure date	City*

\* city where the visa application support letter must be sent to

<b>Place and date</b>	<b>Seal of the NF</b>	<b>NF authorised signature</b>
		Signature of the President or Secretary General of the participating FIG affiliated NF