



HOLON – GRAND-PRIX (INDIVIDUAL & GROUP) – 2019
HOLON – International Tournament – Senior (individual)
HOLON – International Tournament – Junior (individual)
HOLON, ISRAEL
28-29 May 2019



Form to be sent to:

Organizing Committee

Holon Municipality- Department of Sport
 1 Mifratz Shlomo St. Holon 58492 Israel
 Phone: +972 3 5593489, +972 52 6614205, +972 52 6615553
 Fax : +972 3 5593486
 e-mail: rg.holon@gmail.com


Deadline: 26.04.2019

ACCOMMODATION FORM

Federation	Contact person:	
	Phone:	
	E-mail:	

Package / Hotel name	Room type <small>(i.e. single/double/triple/quadruple)</small>	Arr. day	Dept. day	LAST NAME, First Name	Function	Price per person per night	# of nights	Total
GRAND TOTAL								

Special requirements

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



Form to be sent to:

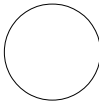
Organizing Committee / Host Federation
<p>Holon Municipality- Department of Sport 1 Mifratz Shlomo St. Holon 58492 Israel Phone: +972 3 5593489, +972 52 6614205, +972 52 6615553 Fax : +972 3 5593486 e-mail: rg.holon@gmail.com</p>

Deadline: 26.03.2019

DEFINITIVE REGISTRATION

Federation	Contact person:
	Phone:
	E-mail:

GRAND-PRIX & International Tournament	NUMBER OF PERSONS
Grand-Prix Individual Gymnasts	
Grand-Prix Group Gymnasts	
Junior Individual Gymnasts	
Coach	
Judge	

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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ORGANIZING COMMITTEE / HOST FEDERATION
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DEADLINE: 26.04.2019

NOMINATIVE ENTRY FORM

FEDERATION			
CONTACT PERSON	LAST NAME:	FIRST NAME:	
ADDRESS	STREET:		POST OFFICE BOX:
	ZIP/POSTCODE:	PLACE:	COUNTRY:
TELEPHONE FAX	TELEPHONE:	MOBILE:	FAX:
E-MAIL			

Grand-Prix (Individual)	
1 individual gymnast:	Date of Birth Licence
2 individual gymnast:	Date of Birth Licence
3 individual gymnast:	Date of Birth Licence
4 individual gymnast:	Date of Birth Licence
Coach:	
Judge:	
Grand-Prix (Groups)	
1. GROUP gymnast:	Date of Birth Licence
2. GROUP gymnast:	Date of Birth Licence
3. GROUP gymnast:	Date of Birth Licence
4. GROUP gymnast:	Date of Birth Licence
5. GROUP gymnast:	Date of Birth Licence
6. GROUP gymnast:	Date of Birth Licence

Coach:		
Judge:		
International Senior Tournament (individuals)		
1 individual gymnast:	Date of Birth	Licence
Coach:		
Judge:		
International Junior Tournament (individuals)		
1 individual gymnast:	Date of Birth	Licence
2 individual gymnast:	Date of Birth	Licence
3 individual gymnast:	Date of Birth	Licence
4 individual gymnast:	Date of Birth	Licence
Coach:		
Judge:		
Extra persons:		

PLACE AND DATE	SEAL OF THE NF	NF AUTHORISED SIGNATURE
		Signature of the President or Secretary general of the FIG affiliated NF.



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Deadline: 26.03.2019

VISA REQUEST FORM

Federation		Contact person:	
		Phone:	
		E-mail:	

LAST NAME, First name	Function	Gender r 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

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