

ANNEX 1

INITIAL ENTRY FORM (Before Saturday 14th April 2018)

We will participate in the “CMAS FINSWIMMING WORLD CHAMPIONSHIPS 2018” in Belgrade (SERBIA).

Initial Entry Form:

Please complete this form and send to CMAS HQ and Organizing Committee by e-mail:

bozana.ostojoc@gmail.com .

Country:		
Federation:		
Total number of Competitions:	male:	female:
Total number of Officials:	male:	female:
Total number of Delegation	male:	female:

Declaration Form:

Release from liability: I hereby declare that I exonerate of liability however so arising, the CMAS, its affiliates, the event Organizing Committee and staff, the venue owners, sponsors, and any other persons that participate at the event, in respect to all and every action or claim about accidents that may occur.

- **Inscriptions will only be valid on the presentation, by each Federation, of the obligatory ACCIDENT INSURANCE COVERAGE POLICY for participants.**

Please check CMAS Procedures for participation in CMAS Championship.

Date

(President Signature / stamp)

(Full name in block letters)

ANNEX 2

HOTEL BOOKING FORM (Before Tuesday 1st May 2018)

Please complete this form and send to CMAS HQ and Organizing Committee by e-mail:

bozana.ostojoc@gmail.com .

Country:

Federation:

Telephone:

Fax:

e-mail:

Please complete:

	Number of Rooms	Date	
		From	To

Single

Double / Triple

	Number of Rooms	Date	
		From	To

Single

Double / Triple

Extra Nights: If you need extra nights, please fill in the following.

Please complete:

	Number of Rooms	Date	
		From	To

Single

Double / Triple

	Number of Rooms	Date	
		From	To

Single

Double / Triple

ANNEX 3

COMPETITORS LIST FORM **(Before Thursday 14th June 2018)**

Please complete this form and send to CMAS HQ and Organizing Committee by e-mail:

bozana.ostojoc@gmail.com .

Country:						
Federation						
Competitors		Men		Women		
Officials		Men		Women		
n.	NAME	FIRST NAME	Athlete, Trainer, Delegation Chief, Doctor, Judge, Other	Male	Female	Single room
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						

ARRIVAL	Date:		Time	
Airport			Flight No.	
DEPARTURE	Date:		Time	
Airport			Flight No.	

Date

(President Signature / stamp)

(Full name in block letters)