

ACCOMMODATION AND TRAVEL INFORMATION FORM

DEADLINE: 30th January 2016
SEND THIS FORM TO: uaeswimming2020@gmail.com
Fax : +971 4 264 8718 annaroca.uaeswimming@gmail.com

Country Name of National Federation

Address

Email Address

Phone No Fax No

Contact..... Person Designation.....

A) Flight Information

	Airport	Flight Number	Time of Arrival / Departure	Terminal	No. of Persons
Arrival					
Departure					

B) Hotel information

Hotel Name	Arrival & Departure Dates		Number of Rooms Required	
	Check In Date	Check Out Date	Single	Twin

Authorization of National Federation by President or Secretary

National Federation Seal

Name

Title

Signature

Date



Title Sponsor