

## VISA/ACCREDITATION APPLICATION FORM

Country ..... Name of National Federation .....

Address .....

Email Address .....

Phone No ..... Fax No .....

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

First Name as in Passport	Last Name as in Passport	Gender	Nationality	Passport No	DOB DD-MM-YY	A-Athlete or O-Official

Authorization of National Federation by President or Secretary

National Federation Seal

Name

Title

Signature

Date

**Important Note: Please attach a colored passport copy for each Team member**