



FINA Women's Water Polo World League 2016 Super Final

June 7th – 12th 2016, Shanghai, China



VISA APPLICATION FORM

FEDERATION:

FAX: _____ **TEL:**

E-MAIL: _____ **CONTACT PERSON:**

PLAYERS:

No.	NAME (Surname, Given Name)	GENDER	DATE OF BIRTH	NATIONALITY	PASSPORT NO.	COUNTRY OF VISA APPLICATION
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Super Final**

June 7th – 12th 2016, Shanghai, China

VISA APPLICATION FORM

OFFICIALS:

No.	NAME (Surname, Given Name)	GENDER	DATE OF BIRTH	NATIONALITY	PASSPORT NO.	ROLE IN TEAM	COUNTRY OF VISA APPLICATION
1							
2							
3							
4							
5							
6							

SIGNATURE: _____ **DATE:**

BY (please type):

PLEASE RETURN THIS FORM TOGETHER WITH THE PASSPORT COPIES BEFORE 10 May 2016.