

ENTRY FORM

for 9th OLD-PRAGUE HAM 2018

to be sent ASAP to the Event's Official Address:

prague-ham@estec.cz

9th Old-Prague Ham International Rugby Veteran Event

PAYMENT CONDITIONS:				=
TOTAL EUR TO BE PAID:	·		<u>EUR</u>	0
Apt. with 2 ro		EUR/pers./night =	0	
Apt. with 2 ro	ooms for 5 persons:	Persons x	EUR/pers./night =	
	in quadruples for	Persons x	EUR/pers./night =	
	in triples for	Persons x	EUR/pers./night =	
	in twins for	Persons x	EUR/pers./night =	
	in doubles for	Persons x	EUR/pers./night =	
	in singles for	Persons x	EUR/pers./night =	0
TOTAL NUMBER OF NIGHTS:	·	nights		
PARTICIPATION PACKAGE REQUE	ST IN HOTEL :			
EXPECTED DEPARTURE DATE				
by. Hight W. (ii by plane), or by bus or	by other transport (to be specified till	Watch 31, 2017)	
EXPECTED ARRIVAL DATE by: flight Nr. (if by plane), or by bus or	by other transport (to he specified till	March 31 2017)	
(to be specified by names till March 31	, 2017)			
TOTAL EXPECTED NUMBER OF PERSONS				
	, ,	_	1 EXTINOM (001).	
AGE CATEGORY:	GOLDEN (35+):		PLATINUM (50+):	
CELLULAR (MOBILE) TEL. NUMBER	2			
TOWN, COUNTRY E-MAIL				
ADDRESS				
TEAM MANAGER'S NAME				
TOWN, COUNTRY				
ADDRESS				
NAME OF THE CLUB / TEAM / GRO	UP			
Please accept the entry of the hereina				
All grey fields to be filled in.				
June 8 - 10, 2018				

- 1) Deposit 1000,-EUR per team to be paid maximum within 21 days from registration
- 2) Rest payment up to total amount to be paid: before March 31, 2018 Invoices with bank details will be sent after registration.

Date:	Form filled in by:	
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